

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Flip Texas Blue Fund	13 Filer ID (Ethics Commission Filers) 00088701
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Jonathan Gracia State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 104,245.30
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 191,848.89
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 52,387.19
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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

Mason Reid

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC

17 COMMITTEE NAME Flip Texas Blue Fund	18 Filer ID (Ethics Commission Filers) 00088701
19 SCHEDULE SUBTOTALS	SUBTOTAL AMOUNT
NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 104,245.30
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6. <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7. <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9. <input type="checkbox"/> SCHEDULE E: LOANS	\$
10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 191,848.89
11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/756 Rpt: 4/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A Walker, Jerimi	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code palos hills, IL 60465		
8 Principal occupation / Job title (See Instructions) Math professor		9 Employer (See Instructions) Moraine valley cc
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SUSAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code TUCSON, AZ 85716-2325		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aanonsen, Lin	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SAINT PAUL, MN 55114		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Macalester College
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aanonsen, Lin	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SAINT PAUL, MN 55114		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Macalester College
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aanonsen, Lin	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SAINT PAUL, MN 55114		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Macalester College

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/756 Rpt: 5/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aanonsen, Lin	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code SAINT PAUL, MN 55114		
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Macalester College
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aanonsen, Lin	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAINT PAUL, MN 55114		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Macalester College
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aanonsen, Lin	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAINT PAUL, MN 55114		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Macalester College
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abadjian, Scott	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Menifee, CA 92586		
Principal occupation / Job title (See Instructions) Operations Officer		Employer (See Instructions) Clout Capital
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abebe, Teshome	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Charleston, IL 61920		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) EIU

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/756 Rpt: 6/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aber, Lisa <hr/> 6 Contributor address; City; State; Zip Code Mariposa, CA 95338	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aber, Lisa <hr/> Contributor address; City; State; Zip Code Mariposa, CA 95338	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Linda <hr/> Contributor address; City; State; Zip Code Columbia, SC 29223	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Linda <hr/> Contributor address; City; State; Zip Code Columbia, SC 29223	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Linda <hr/> Contributor address; City; State; Zip Code Columbia, SC 29223	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/756 Rpt: 7/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Pat	7 Amount of Contribution (\$) \$12.00
6 Contributor address; City; State; Zip Code Onawsy, MI 59765		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Stuart	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Scottsdale, AZ 85254		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Janess	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FENTON, MI 48430		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Mary	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Naples, FL 34102		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Mary	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Naples, FL 34102		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/756 Rpt: 8/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Mary <hr/> 6 Contributor address; City; State; Zip Code Naples, FL 34102	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Vicki <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75150-2953	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adler, Lucy <hr/> Contributor address; City; State; Zip Code Lutherville-Timonium, MD 21093	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agard, Rupert <hr/> Contributor address; City; State; Zip Code Palm Coast, FL 32137	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alanen, Dennis <hr/> Contributor address; City; State; Zip Code Roseville, MN 55113	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/756 Rpt: 9/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alanen, Dennis <hr/> 6 Contributor address; City; State; Zip Code Roseville, MN 55113	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alanen, Dennis <hr/> Contributor address; City; State; Zip Code Roseville, MN 55113	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alanen, Dennis <hr/> Contributor address; City; State; Zip Code Roseville, MN 55113	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alanen, Dennis <hr/> Contributor address; City; State; Zip Code Roseville, MN 55113	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alanen, Dennis <hr/> Contributor address; City; State; Zip Code Roseville, MN 55113	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/756 Rpt: 10/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alanen, Dennis <hr/> 6 Contributor address; City; State; Zip Code Roseville, MN 55113	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alanen, Dennis <hr/> Contributor address; City; State; Zip Code Roseville, MN 55113	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alanen, Dennis <hr/> Contributor address; City; State; Zip Code Roseville, MN 55113	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alderman, Richard <hr/> Contributor address; City; State; Zip Code Asheville, NC 28804	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alejandro, Victor <hr/> Contributor address; City; State; Zip Code Scotts Valley, CA 95066	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Business Development Manager		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/756 Rpt: 11/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Jeri Jo 6 Contributor address; City; State; Zip Code Montgomery, AL 36117	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Jeri Jo Contributor address; City; State; Zip Code Montgomery, AL 36117	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Jeri Jo Contributor address; City; State; Zip Code Montgomery, AL 36117	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Jeri Jo Contributor address; City; State; Zip Code Montgomery, AL 36117	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Maria Contributor address; City; State; Zip Code Covington, GA 30016-4621	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Finance manager		Employer (See Instructions) GA Dept of Transportation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/756 Rpt: 12/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Susan	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Woodstock, NY 12498		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Susan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Woodstock, NY 12498		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Susan	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Woodstock, NY 12498		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfano, Phyllis	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Boca Raton, FL 33434		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfano, Phyllis	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Boca Raton, FL 33434		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/756 Rpt: 13/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfano, Phyllis	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Boca Raton, FL 33434		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfano, Phyllis	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Boca Raton, FL 33434		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allaway, Denise	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Lake Geneva, WI 53147		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allaway, Denise	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Lake Geneva, WI 53147		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allaway, Denise	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Lake Geneva, WI 53147		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/756 Rpt: 14/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allaway, Denise	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Lake Geneva, WI 53147	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Catherine	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Moorpark, CA 93021	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Catherine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Moorpark, CA 93021	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Stella	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Sequim, WA 98382	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Stella	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Sequim, WA 98382	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/756 Rpt: 15/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Stella <hr/> 6 Contributor address; City; State; Zip Code Sequim, WA 98382	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Stella <hr/> Contributor address; City; State; Zip Code Sequim, WA 98382	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Stella <hr/> Contributor address; City; State; Zip Code Sequim, WA 98382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Stella <hr/> Contributor address; City; State; Zip Code Sequim, WA 98382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Stella <hr/> Contributor address; City; State; Zip Code Sequim, WA 98382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/756 Rpt: 16/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Stella <hr/> 6 Contributor address; City; State; Zip Code Sequim, WA 98382	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allie, LuAnn <hr/> Contributor address; City; State; Zip Code Tooele, UT 84074	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allio, Don <hr/> Contributor address; City; State; Zip Code Citrus Heights, CA 95610	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alloway, Judy <hr/> Contributor address; City; State; Zip Code Largo, FL 33773	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alloway, Judy <hr/> Contributor address; City; State; Zip Code Largo, FL 33773	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/756 Rpt: 17/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alloway, Judy	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Largo, FL 33773		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alloway, Judy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Largo, FL 33773		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alonzo, Victoria	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code El Paso, TX 79905		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alward, Barbara	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bainbridge Island, WA 98110		
Principal occupation / Job title (See Instructions) property mangr		Employer (See Instructions) self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alward, Barbara	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Bainbridge Island, WA 98110		
Principal occupation / Job title (See Instructions) property mangr		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/756 Rpt: 18/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alward, Barbara	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Bainbridge Island, WA 98110		
8 Principal occupation / Job title (See Instructions) property mangr		9 Employer (See Instructions) self
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alward, Barbara	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Bainbridge Island, WA 98110		
Principal occupation / Job title (See Instructions) property mangr		Employer (See Instructions) self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alward, Barbara	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bainbridge Island, WA 98110		
Principal occupation / Job title (See Instructions) property mangr		Employer (See Instructions) self
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alward, Barbara	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Bainbridge Island, WA 98110		
Principal occupation / Job title (See Instructions) property mangr		Employer (See Instructions) self
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alward, Barbara	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bainbridge Island, WA 98110		
Principal occupation / Job title (See Instructions) property mangr		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/756 Rpt: 19/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amador, Pablo	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code La Mesa, CA 91941		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amador, Victor	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Upland, CA 91786		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amato, Dolores	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Fresno, CA 93710		
Principal occupation / Job title (See Instructions) LMFT		Employer (See Instructions) Self
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ambauen, Linda	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Seattle, WA 98168		
Principal occupation / Job title (See Instructions) Hospitality		Employer (See Instructions) Linda Ambauen
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ambrose-Bazile, Jerralyn	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Harvey, LA 70058		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/756 Rpt: 20/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amodeo, Adele <hr/> 6 Contributor address; City; State; Zip Code Albany, CA 94706	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bruce <hr/> Contributor address; City; State; Zip Code Plantation, FL 33313	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bruce <hr/> Contributor address; City; State; Zip Code Plantation, FL 33313	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bruce <hr/> Contributor address; City; State; Zip Code Plantation, FL 33313	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Claire <hr/> Contributor address; City; State; Zip Code St Louis, MO 63122	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/756 Rpt: 21/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Claire <hr/> 6 Contributor address; City; State; Zip Code St Louis, MO 63122	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Gay-Dee <hr/> Contributor address; City; State; Zip Code Surprise, AZ 85387	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Jean <hr/> Contributor address; City; State; Zip Code Sisters, OR 97759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Robert <hr/> Contributor address; City; State; Zip Code Columbia, SC 29212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sam <hr/> Contributor address; City; State; Zip Code Sherman Oaks, CA 91401	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/756 Rpt: 22/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sam	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Sherman Oaks, CA 91401		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sam	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Sherman Oaks, CA 91401		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andres, Julia	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Mount Pleasant, SC 29464		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andreu, Denise	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Brooklyn, NY 11210		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andreu, Denise	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Brooklyn, NY 11210		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/756 Rpt: 23/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andreu, Denise <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11210	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andreu, Denise <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11210	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Laura <hr/> Contributor address; City; State; Zip Code Mantee, MS 39751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) MSU
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angel, Lynne <hr/> Contributor address; City; State; Zip Code Portland, OR 97201	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) LIA Inc.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angel, Sue <hr/> Contributor address; City; State; Zip Code Solana Beach, CA 92075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/756 Rpt: 24/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anker, Laura	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Stone Ridge, NY 12484		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Annunziata, Diane	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code North Salem, NY 10560		
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Diane Annunziata
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ansley, Donald	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Charlton, MA 01507		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Antonakos, Jetta	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Seattle, WA 98133		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apolinario, Patricia	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Tracy, CA 95377		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) San Joaquin General Hospital

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/756 Rpt: 25/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appel, Mark <hr/> 6 Contributor address; City; State; Zip Code VALLEJO, CA 94590	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Marketing contractor		9 Employer (See Instructions) Mark Appel
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appel, Mark <hr/> Contributor address; City; State; Zip Code Jamestown, CA 95327	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Marketing Contractor		Employer (See Instructions) Mark Appel
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arellano, Martha <hr/> Contributor address; City; State; Zip Code Mission viejo, CA 92691	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Elig tech		Employer (See Instructions) County of Orange
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arey, Mary <hr/> Contributor address; City; State; Zip Code Salisbury, NC 28146	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arey, Mary <hr/> Contributor address; City; State; Zip Code Salisbury, NC 28146	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/756 Rpt: 26/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arey, Mary	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Salisbury, NC 28146		
8 Principal occupation / Job title (See Instructions) real estate broker		9 Employer (See Instructions) Self
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armeni, Diane	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Hansville, WA 98340		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armeni, Diane	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Hansville, WA 98340		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armeni, Diane	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Hansville, WA 98340		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armeni, Diane	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Hansville, WA 98340		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/756 Rpt: 27/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armeni, Diane	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Hansville, WA 98340		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armeni, Diane	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Hansville, WA 98340		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armeni, Diane	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Hansville, WA 98340		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armeni, Diane	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Hansville, WA 98340		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armeni, Diane	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Hansville, WA 98340		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/756 Rpt: 28/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armeni, Diane <hr/> 6 Contributor address; City; State; Zip Code Hansville, WA 98340	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armeni, Diane <hr/> Contributor address; City; State; Zip Code Hansville, WA 98340	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armeni, Diane <hr/> Contributor address; City; State; Zip Code Hansville, WA 98340	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Connie <hr/> Contributor address; City; State; Zip Code Windermere, FL 34786	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Connie <hr/> Contributor address; City; State; Zip Code Windermere, FL 34786	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/756 Rpt: 29/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Connie	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Windermere, FL 34786		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Sharon	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Hotchkiss, CO 81419		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnemann, Cheryl	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Roswell, GA 30075		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnemann, Cheryl	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Roswell, GA 30075		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ash, Barbara	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Clarksburg, WV 26301		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/756 Rpt: 30/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashby, Charmon <hr/> 6 Contributor address; City; State; Zip Code San Jose, CA 95148	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashley, Josie <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85251	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Astill, Linda <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aubrecht, Thomas <hr/> Contributor address; City; State; Zip Code Saint Paul, MN 55105	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aubrecht, Thomas <hr/> Contributor address; City; State; Zip Code Saint Paul, MN 55105	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/756 Rpt: 31/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aubrecht, Thomas <hr/> 6 Contributor address; City; State; Zip Code Saint Paul, MN 55105	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aulakh, Kulwant <hr/> Contributor address; City; State; Zip Code Fairfield, CA 94534-4029	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Auzenne, Laura <hr/> Contributor address; City; State; Zip Code Las Cruces, NM 88005	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avelar, Sean <hr/> Contributor address; City; State; Zip Code Johnston, RI 02919	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Service Delivery Manager		Employer (See Instructions) HealthEquity
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avenarius, Rosemary <hr/> Contributor address; City; State; Zip Code Bear, DE 19701	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/756 Rpt: 32/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avery, RitaMaria	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78201		
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avery, RitaMaria	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code San Antonio, TX 78201		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avery, RitaMaria	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code San Antonio, TX 78201		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avery, RitaMaria	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code San Antonio, TX 78201		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avery, RitaMaria	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code San Antonio, TX 78201		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/756 Rpt: 33/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avery, RitaMaria	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78201		
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avery, RitaMaria	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Antonio, TX 78201		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avery, RitaMaria	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Antonio, TX 78201		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Awada, Aida	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Cooper city, FL 33330		
Principal occupation / Job title (See Instructions) Language Analyst		Employer (See Instructions) DOJ
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayogu, Melvin	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Atlanta, GA 30316-2389		
Principal occupation / Job title (See Instructions) Economist		Employer (See Instructions) Emory University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/756 Rpt: 34/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) B, Don	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Tamarac, FL 33321		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, DEBBIE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Elk Grove, CA 95624		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, DEBBIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Elk Grove, CA 95624		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, DEBBIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Elk Grove, CA 95624		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEYER, MONICA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11210-1125		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/756 Rpt: 35/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEYER, MONICA <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11210-1125	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEYER, MONICA <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11210-1125	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEYER, MONICA <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11210-1125	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEYER, MONICA <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11210-1125	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKS, PHILIP <hr/> Contributor address; City; State; Zip Code RICHMOND, VA 23235	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/756 Rpt: 36/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Babcock, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Jefferson City, MO 65109	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Live music venue owner		9 Employer (See Instructions) Self employeed/The Mission LLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bachman, Mark <hr/> Contributor address; City; State; Zip Code San Diego, CA 92127	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) BTL Inc
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bachman, Mark <hr/> Contributor address; City; State; Zip Code San Diego, CA 92127	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) BTL Inc
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baechle, Joel <hr/> Contributor address; City; State; Zip Code Jackson, CA 95642	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) R&D		Employer (See Instructions) MP ASSOC INC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baechle, Joel <hr/> Contributor address; City; State; Zip Code Jackson, CA 95642	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) R&D		Employer (See Instructions) MP ASSOC INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/756 Rpt: 37/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baechle, Joel <hr/> 6 Contributor address; City; State; Zip Code Jackson, CA 95642	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) R&D		9 Employer (See Instructions) MP ASSOC INC
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baechle, Joel <hr/> Contributor address; City; State; Zip Code Jackson, CA 95642	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) R&D		Employer (See Instructions) MP ASSOC INC
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baechle, Joel <hr/> Contributor address; City; State; Zip Code Jackson, CA 95642	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) R&D		Employer (See Instructions) MP ASSOC INC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baechler, Phil <hr/> Contributor address; City; State; Zip Code Edmonds, WA 98020-3235	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baer, Donald <hr/> Contributor address; City; State; Zip Code Richland, WA 99354	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/756 Rpt: 38/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baez, David <hr/> 6 Contributor address; City; State; Zip Code Aurora, CO 80016-7505	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MD		9 Employer (See Instructions) RMIM
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baez, David <hr/> Contributor address; City; State; Zip Code Aurora, CO 80016-7505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) RMIM
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baez, David <hr/> Contributor address; City; State; Zip Code Aurora, CO 80016-7505	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) RMIM
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baez, David <hr/> Contributor address; City; State; Zip Code Aurora, CO 80016-7505	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) RMIM
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baez, David <hr/> Contributor address; City; State; Zip Code Aurora, CO 80016-7505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) RMIM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/756 Rpt: 39/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baez, David <hr/> 6 Contributor address; City; State; Zip Code Aurora, CO 80016-7505	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MD		9 Employer (See Instructions) RMIM
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bahr, Lauren <hr/> Contributor address; City; State; Zip Code New York, NY 10028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) none
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bahr, Lauren <hr/> Contributor address; City; State; Zip Code New York, NY 10028	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) none
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Sarah <hr/> Contributor address; City; State; Zip Code North Little Rock, AR 72118	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Research Associate		Employer (See Instructions) U of A Little Rock
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Sarah <hr/> Contributor address; City; State; Zip Code North Little Rock, AR 72118	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Research Associate		Employer (See Instructions) U of A Little Rock

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/756 Rpt: 40/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bair, Kerry <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98116	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bair, Kerry <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Donald <hr/> Contributor address; City; State; Zip Code Pound, VA 24279-0564	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Phyllis <hr/> Contributor address; City; State; Zip Code Laurel, MD 20724	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Phyllis <hr/> Contributor address; City; State; Zip Code Laurel, MD 20724	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/756 Rpt: 41/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Phyllis <hr/> 6 Contributor address; City; State; Zip Code Laurel, MD 20724	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bakshi, Amarjit <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balash, John <hr/> Contributor address; City; State; Zip Code New York, NY 10019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Verity Wine Partners
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Gary <hr/> Contributor address; City; State; Zip Code Winter Park, FL 32792	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bales, Denise <hr/> Contributor address; City; State; Zip Code Lees Summit, MO 64063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) phoenix home health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/756 Rpt: 42/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bales, Denise	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Lees Summit, MO 64063		
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) phoenix home health
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bales, Denise	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Lees Summit, MO 64063		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) phoenix home health
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bales, Denise	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Lees Summit, MO 64063		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) phoenix home health
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bales, Denise	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Lees Summit, MO 64063		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) phoenix home health
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bales, Denise	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Lees Summit, MO 64063		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) phoenix home health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/756 Rpt: 43/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ball, Alfred <hr/> 6 Contributor address; City; State; Zip Code Somerset, NJ 08873	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) Self
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballentine, John <hr/> Contributor address; City; State; Zip Code Honolulu, HI 96822	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballentine, John <hr/> Contributor address; City; State; Zip Code Honolulu, HI 96822	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballentine, John <hr/> Contributor address; City; State; Zip Code Honolulu, HI 96822	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballentine, John <hr/> Contributor address; City; State; Zip Code Honolulu, HI 96822	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/756 Rpt: 44/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bann, Harold	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Chetek, WI 54728		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banning, Bradley	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Kansas City, MO 64152		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baptist, Jeremy	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Overland Park, KS 66207		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baptist, Jeremy	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Overland Park, KS 66207		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baptiste, Patricia	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code San Francisco, CA 94124		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/756 Rpt: 45/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbieri, Renee	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Los Angeles, CA 90041		
8 Principal occupation / Job title (See Instructions) Bookkeeping		9 Employer (See Instructions) Self
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbieri, Renee	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Los Angeles, CA 90041		
Principal occupation / Job title (See Instructions) Bookkeeping		Employer (See Instructions) Self
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barcelo, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SPRING, TX 77379		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Edward	Amount of Contribution (\$) \$6.66
Contributor address; City; State; Zip Code Colorado Springs, CO 80911		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Edward	Amount of Contribution (\$) \$12.34
Contributor address; City; State; Zip Code Colorado Springs, CO 80911		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/756 Rpt: 46/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Edward <hr/> 6 Contributor address; City; State; Zip Code Colorado Springs, CO 80911	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Mary <hr/> Contributor address; City; State; Zip Code Greenville, SC 29615	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Dental Consultant		Employer (See Instructions) Contract
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Gail <hr/> Contributor address; City; State; Zip Code Columbia, SC 29204-7723	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of South Carolina
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Lanita <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93314	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Kathleen <hr/> Contributor address; City; State; Zip Code Louisville, KY 40229	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/756 Rpt: 47/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnette, Brenda	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Acton, CA 93510	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnette, Brenda	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Acton, CA 93510	
Principal occupation / Job title (See Instructions) RETIRED General Manager		Employer (See Instructions) City of Los Angeles
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnette, Brenda	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Acton, CA 93510	
Principal occupation / Job title (See Instructions) RETIRED General Manager		Employer (See Instructions) City of Los Angeles
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnette, Brenda	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code Acton, CA 93510	
Principal occupation / Job title (See Instructions) RETIRED General Manager		Employer (See Instructions) City of Los Angeles
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnette, Brenda	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code Acton, CA 93510	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/756 Rpt: 48/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baron, Andre <hr/> 6 Contributor address; City; State; Zip Code Lexington, KY 40415	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Contractor		9 Employer (See Instructions) Brushworks LLC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baron, Andre <hr/> Contributor address; City; State; Zip Code Lexington, KY 40415	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Brushworks LLC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barone, Alan <hr/> Contributor address; City; State; Zip Code Cedarville, OH 45314	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barone, Alan <hr/> Contributor address; City; State; Zip Code Cedarville, OH 45314	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barone, Alan <hr/> Contributor address; City; State; Zip Code Cedarville, OH 45314	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/756 Rpt: 49/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrack, Lisa <hr/> 6 Contributor address; City; State; Zip Code Clearwater, FL 33763	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Implementation specialist		9 Employer (See Instructions) Eye care leaders
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrack, Lisa <hr/> Contributor address; City; State; Zip Code Clearwater, FL 33763	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Implementation specialist		Employer (See Instructions) Eye care leaders
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Barbara <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79493	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Francis <hr/> Contributor address; City; State; Zip Code Hummelstown, PA 17036	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartley, Pauline <hr/> Contributor address; City; State; Zip Code Vancouver, WA 97683	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/756 Rpt: 50/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barto, Andrew <hr/> 6 Contributor address; City; State; Zip Code Somerville, MA 02143	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Kevin <hr/> Contributor address; City; State; Zip Code Irvine, CA 92620	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) Self
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Margaret <hr/> Contributor address; City; State; Zip Code Vancouver, WA 98663	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Sherryl <hr/> Contributor address; City; State; Zip Code Detroit, MI 48205	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CRCA		Employer (See Instructions) Trilogy
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Battenhouse, Anna <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Research Associate		Employer (See Instructions) University of Texas at Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/756 Rpt: 51/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Battey, Sarah <hr/> 6 Contributor address; City; State; Zip Code Watkinsville, GA 30677	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Battey, Sarah <hr/> Contributor address; City; State; Zip Code Watkinsville, GA 30677	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauer, Marilyn <hr/> Contributor address; City; State; Zip Code Cambridge, IA 50046	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baumann, Rudolph <hr/> Contributor address; City; State; Zip Code Greeneville, TN 37745	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bayless, Debra <hr/> Contributor address; City; State; Zip Code PARSONS, KS 67357	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/756 Rpt: 52/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bayless, Debra	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Parsons, KS 67357		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bea, Terry	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Biloxi, MS 39531		
Principal occupation / Job title (See Instructions) Security		Employer (See Instructions) VA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bea, Terry	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Biloxi, MS 39531		
Principal occupation / Job title (See Instructions) Security		Employer (See Instructions) VA
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaber, Linda	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Kenosha, WI 53153		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Ascension
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beach, Paul	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Fallbrook, CA 92028		
Principal occupation / Job title (See Instructions) Technical Specialist		Employer (See Instructions) Legoland California

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/756 Rpt: 53/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beach, Paul <hr/> 6 Contributor address; City; State; Zip Code Fallbrook, CA 92028	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Technical Specialist		9 Employer (See Instructions) Legoland California
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beauchemin, Janine <hr/> Contributor address; City; State; Zip Code Stuart, FL 34994	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beauvais, Raymond <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Paul <hr/> Contributor address; City; State; Zip Code Bethany, MO 64424	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Graceland university
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Lyle <hr/> Contributor address; City; State; Zip Code Enumclaw, WA 98022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/756 Rpt: 54/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Michael	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Austin, TX 78736		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Texas DFPS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckman, Peggy	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Coraville, IA 52241		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckman, Ruthi	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chicago, IL 60611		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beebe, B Terhune	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Covina, CA 91723		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beebe, B Terhune	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Covina, CA 91723		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/756 Rpt: 55/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behar, Marion	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Columbus, GA 31904		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behar, Marion	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Columbus, GA 31904		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belanger, Robert	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Fiskdale, MA 01518-1102		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belcher, Xavier	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Greenville, SC 29611		
Principal occupation / Job title (See Instructions) Instrumentation Tech		Employer (See Instructions) Aerotek
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Beverly	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Clovis, CA 93619		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/756 Rpt: 56/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Magdalene	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Thornton, CO 80241		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Marla	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Carmel Valley, CA 93924		
Principal occupation / Job title (See Instructions) Body Therapist		Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belle, Donna	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Superior, CO 80027		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellini, Sonia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Portland, OR 97232-3332		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Bellini's Inc
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellini, Sonia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Portland, OR 97232-3332		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Bellini's Inc

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/756 Rpt: 57/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellini, Sonia <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97232-3332	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Bellini's Inc
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellini, Sonia <hr/> Contributor address; City; State; Zip Code Portland, OR 97232-3332	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Bellini's Inc
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellini, Sonia <hr/> Contributor address; City; State; Zip Code Portland, OR 97232-3332	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Bellini's Inc
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bempkins, Scott <hr/> Contributor address; City; State; Zip Code Groton, MA 01450	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Senior Manager		Employer (See Instructions) Dell Technologies
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benavides, Otto <hr/> Contributor address; City; State; Zip Code Collierville, TN 38017-6153	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/756 Rpt: 58/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bendet, Linda <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10003	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) retired
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bendet, Linda <hr/> Contributor address; City; State; Zip Code New York, NY 10003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin, Jean <hr/> Contributor address; City; State; Zip Code Queens, NY 11375	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Patricia <hr/> Contributor address; City; State; Zip Code Cocoa, FL 32927	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) Boeing
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bercegeay, Diane <hr/> Contributor address; City; State; Zip Code Marietta, GA 30064	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/756 Rpt: 59/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bercegeay, Diane <hr/> 6 Contributor address; City; State; Zip Code Marietta, GA 30064	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergh, Kendall <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15236	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergh, Kendall <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15236	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Family Literacy Network
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Family Literacy Network

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/756 Rpt: 60/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Houston, TX 77035		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Family Literacy Network
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berley, Tanya	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code North Aurora, IL 60542		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berley, Tanya	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code North Aurora, IL 60542		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bermel, Honey	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Vancouver, WA 98686		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bern, Lilian	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Rogers, AR 72756		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/756 Rpt: 61/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernard, John	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Schaumburg, IL 60194		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernard, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Schaumburg, IL 60194		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernard, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Schaumburg, IL 60194		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernard, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Schaumburg, IL 60194		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernard, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Schaumburg, IL 60194		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/756 Rpt: 62/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BernardHarris, Rita <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90056	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BernardHarris, Rita <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90056	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BernardHarris, Rita <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90056	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BernardHarris, Rita <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90056	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernhardt, Anthony <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94705	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/756 Rpt: 63/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernhardt, Anthony <hr/> 6 Contributor address; City; State; Zip Code Berkeley, CA 94705	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernhardt, Anthony <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Bea <hr/> Contributor address; City; State; Zip Code Ashland, OR 97520	Amount of Contribution (\$) \$2.09
Principal occupation / Job title (See Instructions) Nurse Manager		Employer (See Instructions) Wellness 2000 Inc.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Bea <hr/> Contributor address; City; State; Zip Code Ashland, OR 97520	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Nurse Manager		Employer (See Instructions) Wellness 2000 Inc.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Kathy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/756 Rpt: 64/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Melissa <hr/> 6 Contributor address; City; State; Zip Code New Braunfels, TX 78130	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Administration		9 Employer (See Instructions) Texas Disposal Systems
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Melissa <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Texas Disposal Systems
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bertholet, Paul <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21212	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Yes		Employer (See Instructions) Self
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bertozzi, Linda <hr/> Contributor address; City; State; Zip Code Lk Havasu City, AZ 86406	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Design		Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Best, Jean <hr/> Contributor address; City; State; Zip Code Ruston, WA 98407	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/756 Rpt: 65/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Best, Jean <hr/> 6 Contributor address; City; State; Zip Code Ruston, WA 98407	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beth, Wendy <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48105	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bethell, Anne <hr/> Contributor address; City; State; Zip Code Portland, OR 97205	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bethell, Anne <hr/> Contributor address; City; State; Zip Code Portland, OR 97205	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bettarel, Robin <hr/> Contributor address; City; State; Zip Code Washington, DC 20007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/756 Rpt: 66/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biadgelgne, Abraham <hr/> 6 Contributor address; City; State; Zip Code Sugarland, TX 77479	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired from chevron		9 Employer (See Instructions) Retired
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickle, Robert <hr/> Contributor address; City; State; Zip Code Apex, NC 27502	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biehn, Kenneth <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bindeman, Jennifer <hr/> Contributor address; City; State; Zip Code Houston, TX 77070	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) RealPage
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Binsacca, Meredith <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94705	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/756 Rpt: 67/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Binsacca, Meredith	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Berkeley, CA 94705		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Binsacca, Meredith	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Berkeley, CA 94705		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Binsacca, Meredith	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Berkeley, CA 94705		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birch, Denton	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Malabar, FL 32950		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bird, Cornelius	Amount of Contribution (\$) \$14.00
Contributor address; City; State; Zip Code Atlanta, GA 30341		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/756 Rpt: 68/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bird, Cornelius <hr/> 6 Contributor address; City; State; Zip Code Atlanta, GA 30341	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birke, Carol <hr/> Contributor address; City; State; Zip Code Virginia Beach, VA 23451	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birke, Carol <hr/> Contributor address; City; State; Zip Code Virginia Beach, VA 23451	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birke, Carol <hr/> Contributor address; City; State; Zip Code Virginia Beach, VA 23451	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birke, Carol <hr/> Contributor address; City; State; Zip Code Virginia Beach, VA 23451	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/756 Rpt: 69/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birr, Deborah	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Graham, NC 27253		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bisno, Barbara	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Miami Beach, FL 33139		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackman, Charlotte A	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Chicago, IL 60628		
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions) None
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blakely, Barry	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Williston, VT 05495		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blakely, Barry	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Williston, VT 05495		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/756 Rpt: 70/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blakely, Barry <hr/> 6 Contributor address; City; State; Zip Code Williston, VT 05495	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blakeslee, Betsey <hr/> Contributor address; City; State; Zip Code Georgetown, CO 80444	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blakeslee, Betsey <hr/> Contributor address; City; State; Zip Code Georgetown, CO 80444	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanc, Philippe <hr/> Contributor address; City; State; Zip Code Whitsett, NC 27377	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Airbus America
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanc, Philippe <hr/> Contributor address; City; State; Zip Code Whitsett, NC 27377	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Airbus America

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/756 Rpt: 71/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanc, Philippe <hr/> 6 Contributor address; City; State; Zip Code Whitsett, NC 27377	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Airbus America
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanc, Philippe <hr/> Contributor address; City; State; Zip Code Whitsett, NC 27377	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Airbus America
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blankstein, Rebecca <hr/> Contributor address; City; State; Zip Code Dayton, NJ 08810	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) HJAHc an FQHC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bleich, Tammy <hr/> Contributor address; City; State; Zip Code Cleveland, OH 44143	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bleich, Tammy <hr/> Contributor address; City; State; Zip Code Cleveland, OH 44143	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/756 Rpt: 72/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bletterman, Bernie <hr/> 6 Contributor address; City; State; Zip Code Copake, NY 12516-0183	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bletterman, Bernie <hr/> Contributor address; City; State; Zip Code Copake, NY 12516-0183	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bliven, George <hr/> Contributor address; City; State; Zip Code Santa Fe, NM 87507	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Human Design America
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blizzard, James <hr/> Contributor address; City; State; Zip Code Palm Harbor, FL 34683	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blizzard, James <hr/> Contributor address; City; State; Zip Code Palm Harbor, FL 34683	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/756 Rpt: 73/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloch, Anne Marie	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Oakland, CA 94618		
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloch, Anne-Marie	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Oakland, CA 94618		
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) self
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloland, Sue	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Hastings On Hudson, NY 10706-1417		
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) self
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloland, Sue	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Hastings On Hudson, NY 10706-1417		
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloomfield, Barry	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Mesa, AZ 85212		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/756 Rpt: 74/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blum, Howard <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60611	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumberg, Steven <hr/> Contributor address; City; State; Zip Code Denver, CO 80222	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sales Rep		Employer (See Instructions) self-employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bock, Susan <hr/> Contributor address; City; State; Zip Code Detroit, MI 48202	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Minister		Employer (See Instructions) Grace Episcopal Church
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, David <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, David <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/756 Rpt: 75/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, David	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Menlo Park, CA 94025		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, David	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Menlo Park, CA 94025		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogle, Basil Don	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Pompano Beach, FL 33321		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boland, Richard	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Chagrin Falls, OH 44023		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolton, Jacalyn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code West Bloomfield Township, MI 48322		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/756 Rpt: 76/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolton, Jacalyn	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code West Bloomfield Township, MI 48322		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnell, Karen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Cincinnati, OH 45247		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boorsma, Stephen	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code South Range, WI 54874		
Principal occupation / Job title (See Instructions) Crane operator		Employer (See Instructions) IUOE Local # 49
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boorsma, Stephen	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code South Range, WI 54874		
Principal occupation / Job title (See Instructions) Crane operator		Employer (See Instructions) IUOE Local # 49
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Booze, Valerie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Wilmington, NC 28409		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/756 Rpt: 77/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Booze, Valerie <hr/> 6 Contributor address; City; State; Zip Code Wilmington, NC 28409	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boudinot, James <hr/> Contributor address; City; State; Zip Code Tega Cay, SC 29708	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowe, Elsbeth <hr/> Contributor address; City; State; Zip Code Concord, NH 03303	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Donita <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76033	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Donita <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76033	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/756 Rpt: 78/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Jack <hr/> 6 Contributor address; City; State; Zip Code Downingtown, PA 19335	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Technical Director		9 Employer (See Instructions) QVC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Margaret <hr/> Contributor address; City; State; Zip Code St Augustine, FL 32095	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Rebecca <hr/> Contributor address; City; State; Zip Code Brookville, OH 45309-9343	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Rebecca <hr/> Contributor address; City; State; Zip Code Brookville, OH 45309-9343	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Rebecca <hr/> Contributor address; City; State; Zip Code Brookville, OH 45309-9343	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/756 Rpt: 79/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Rebecca	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Brookville, OH 45309-9343		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boxenhorn, Lynne	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pompano Beach, FL 33066		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boxenhorn, Lynne	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pompano Beach, FL 33066		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boxenhorn, Lynne	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pompano Beach, FL 33066		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boxenhorn, Lynne	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pompano Beach, FL 33066		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/756 Rpt: 80/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boxenhorn, Lynne <hr/> 6 Contributor address; City; State; Zip Code Pompano Beach, FL 33066	7 Amount of Contribution (\$) \$18.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyce, Phuong <hr/> Contributor address; City; State; Zip Code Nesconset, NY 11767	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyce, Phuong <hr/> Contributor address; City; State; Zip Code Nesconset, NY 11767	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyce, Phuong <hr/> Contributor address; City; State; Zip Code Nesconset, NY 11767	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyce, Phuong <hr/> Contributor address; City; State; Zip Code Nesconset, NY 11767	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/756 Rpt: 81/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyce, Phuong <hr/> 6 Contributor address; City; State; Zip Code Nesconset, NY 11767	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyce, Phuong <hr/> Contributor address; City; State; Zip Code Nesconset, NY 11767	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyce, Phuong <hr/> Contributor address; City; State; Zip Code Nesconset, NY 11767	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyce, Phuong <hr/> Contributor address; City; State; Zip Code Nesconset, NY 11767	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyce, Phuong <hr/> Contributor address; City; State; Zip Code Nesconset, NY 11767	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/756 Rpt: 82/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyce, Phuong	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Nesconset, NY 11767		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyce, Phuong	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Nesconset, NY 11767		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyce, Phuong	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Nesconset, NY 11767		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyce, Phuong	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Nesconset, NY 11767		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradford, Jeffrey	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Beverly, MA 01915		
Principal occupation / Job title (See Instructions) IT SVCS Dir.		Employer (See Instructions) Museum of Fine Arts Boston

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradford, Jeffrey	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Beverly, MA 01915		
8 Principal occupation / Job title (See Instructions) IT SVCS Dir.		9 Employer (See Instructions) Museum of Fine Arts Boston
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradshaw, R. Bruce	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Gloucester, MA 01930-4141		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Ananda	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BOLINAS, CA 94924-0873		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Ananda	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BOLINAS, CA 94924-0873		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braid, Robert	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pompano Beach, FL 33076		
Principal occupation / Job title (See Instructions) Gen. Contractor		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/756 Rpt: 84/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bramlett, Don	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Rockford, IL 61108		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brand, Roberta	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Scottsdale, AZ 85260		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brand, Roberta	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Scottsdale, AZ 85260		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brannon, Gloria	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Norman, OK 73072		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Branson, Nicholas	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Cary, IL 60013		
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) College of Lake County

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/756 Rpt: 85/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Beverly	7 Amount of Contribution (\$) \$12.00
	6 Contributor address; City; State; Zip Code San Diego, CA 92103	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brawley, Ellen T	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Exeter, NH 03833	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brazee, Mary Ann	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Green Cove Springs, FL 32043	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breen, Vicki	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Albuquerque, NM 87109	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bresenhan, Karey	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code La Grange, TX 78945	
Principal occupation / Job title (See Instructions) Business executive		Employer (See Instructions) Quilts II

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/756 Rpt: 86/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bresenhan, Karey <hr/> 6 Contributor address; City; State; Zip Code La Grange, TX 78945	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Business executive		9 Employer (See Instructions) Quilts II
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bresenhan, Karey <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Business executive		Employer (See Instructions) Quilts II
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Frank <hr/> Contributor address; City; State; Zip Code Newton, MA 02459	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Heritage Design Law
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Frank <hr/> Contributor address; City; State; Zip Code Newton, MA 02459	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Heritage Design Law
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briggs, Shirley <hr/> Contributor address; City; State; Zip Code Snellville, GA 30078-2844	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/756 Rpt: 87/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briggs, Shirley <hr/> 6 Contributor address; City; State; Zip Code Snellville, GA 30078-2844	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briggs, Shirley <hr/> Contributor address; City; State; Zip Code Snellville, GA 30078-2844	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briggs, Shirley <hr/> Contributor address; City; State; Zip Code Snellville, GA 30078-2844	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bringer, Pamela <hr/> Contributor address; City; State; Zip Code Rochester Hills, MI 48309	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bringer, Pamela <hr/> Contributor address; City; State; Zip Code Rochester Hills, MI 48309	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/756 Rpt: 88/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briscoe, James <hr/> 6 Contributor address; City; State; Zip Code New Orleans, LA 70125	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briscoe, James <hr/> Contributor address; City; State; Zip Code New Orleans, LA 70125	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briscoe, James <hr/> Contributor address; City; State; Zip Code New Orleans, LA 70125	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briscoe, James <hr/> Contributor address; City; State; Zip Code New Orleans, LA 70125	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Britt, Robin <hr/> Contributor address; City; State; Zip Code Houston, TX 77063	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/756 Rpt: 89/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadaway, Michael	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Bowie, MD 20716		
8 Principal occupation / Job title (See Instructions) IT Specialist		9 Employer (See Instructions) Fed Gov't
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, Pamela	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Sequim, WA 98382		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, Pamela	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Sequim, WA 98382		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brolin, Grania	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Water Mill, NY 11976		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brook, Sarah	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Santa Cruz, CA 95062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/756 Rpt: 90/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Elaine	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Oakland, CA 94606		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Elaine	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Oakland, CA 94606		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Abraham	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Richfield, OH 44286		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Charles	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Buffalo, NY 14208		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Diane	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Santa Fe, NM 87507		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/756 Rpt: 91/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Donella <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77584	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Elaine <hr/> Contributor address; City; State; Zip Code Clewiston, FL 33440	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Elaine <hr/> Contributor address; City; State; Zip Code Clewiston, FL 33440	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jennifer <hr/> Contributor address; City; State; Zip Code Lawrence, KS 66049	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Patti <hr/> Contributor address; City; State; Zip Code Grand Blanc, MI 48439	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/756 Rpt: 92/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Tony	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Stone Mtn, GA 30087		
8 Principal occupation / Job title (See Instructions) insurance agent		9 Employer (See Instructions) State Farm
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownell, Nancy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bowling Green, OH 43402		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownell, Nancy	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Bowling Green, OH 43402		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownell, Nancy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bowling Green, OH 43402		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruder, Lora	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WILLIAMSTON, MI 48895		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/756 Rpt: 93/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brunette, Bruce	7 Amount of Contribution (\$) \$24.00
	6 Contributor address; City; State; Zip Code Juneau, AK 99801	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brunette, Bruce	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Juneau, AK 99801	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brunette, Bruce	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Juneau, AK 99801	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brusegar, Carol	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Cypress, CA 90630-3511	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryan, Owen	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Miami, FL 33169	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/756 Rpt: 94/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Allison <hr/> 6 Contributor address; City; State; Zip Code Seminole, FL 33772	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Pinellas County Schools
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Charley <hr/> Contributor address; City; State; Zip Code St. Petersburg, FL 33712	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Charley <hr/> Contributor address; City; State; Zip Code St. Petersburg, FL 33712	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Judy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryson, Arthur <hr/> Contributor address; City; State; Zip Code Crete, IL 60417	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/756 Rpt: 95/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, M Beth	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Superior, WI 54880-3919		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckalew, Trina	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Meridian, ID 83646		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckalew, Trina	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Meridian, ID 83646		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckalew, Trina	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Meridian, ID 83646		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Margaret	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Minneapolis, MN 55406		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/756 Rpt: 96/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bueckers, Arthur B <hr/> 6 Contributor address; City; State; Zip Code Cold Spring, MN 56320	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bull, Anne <hr/> Contributor address; City; State; Zip Code Bethany Beach, DE 19930	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bullick, Donald <hr/> Contributor address; City; State; Zip Code Petaluma, CA 94952	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burds, Margaret <hr/> Contributor address; City; State; Zip Code McLean, VA 22102	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burguillos, Lily <hr/> Contributor address; City; State; Zip Code Aventura, FL 33180	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) ATOM

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/756 Rpt: 97/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burk, Deborah <hr/> 6 Contributor address; City; State; Zip Code Port Hadlock, WA 98339	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Brian <hr/> Contributor address; City; State; Zip Code Greenwood Village, CO 80121	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) SBA Lender		Employer (See Instructions) Byline Bank
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Deborah K. <hr/> Contributor address; City; State; Zip Code El Cajon, CA 92019	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Deborah K. <hr/> Contributor address; City; State; Zip Code El Cajon, CA 92019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Kathleen <hr/> Contributor address; City; State; Zip Code Lexington, MA 02420-3405	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/756 Rpt: 98/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Lexington, MA 02420-3405	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burks, Ken <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burks, Ken <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnett, Michael <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95841	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnett, Patricia <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84103	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/756 Rpt: 99/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Brian	7 Amount of Contribution (\$) \$24.00
	6 Contributor address; City; State; Zip Code Sebastian, FL 32958	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Robert	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Melrose, MA 02176	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns-Ferro, Allison	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Ennglewood, NJ 07631	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns-Ferro, Allison	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Ennglewood, NJ 07631	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burstein, Samuel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Belleville, IL 62221	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/756 Rpt: 100/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, William	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Cary, NC 27511		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Busch, Olwen	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code JACKSONVILLE, FL 32204		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Busch, Olwen	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code JACKSONVILLE, FL 32204-4651		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buswell, Henry	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Melbourne, FL 32934		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) HPE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buswell, Henry	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Melbourne, FL 32934		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) HPE

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/756 Rpt: 101/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Bernard (Bernie)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Charlestown, RI 02813	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butterworth, Guy	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Cranbury, NJ 08512	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butungi Niwagaba, Lillian	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Roslyn Heights, NY 11577-1140	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) NYIT
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrd, Anita	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Ft Washington, MD 20744	
Principal occupation / Job title (See Instructions) Emergency Mgt		Employer (See Instructions) USDA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C Babcock, Jane	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Edmonds, WA 98020	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/756 Rpt: 102/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C Babcock, Jane	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Edmonds, WA 98020		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C Babcock, Jane	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Edmonds, WA 98020		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C Babcock, Jane	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Edmonds, WA 98020		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALOVINI, MARILOU	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NEW HYDE PARK, NY 11040		
Principal occupation / Job title (See Instructions) Teacher/Teacher Assistant		Employer (See Instructions) BCCS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDIDI, CAROLE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WILLIAMSTOWN, NJ 08094		
Principal occupation / Job title (See Instructions) Learning Disabilities Teacher-Consultant		Employer (See Instructions) Independent Contractor

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/756 Rpt: 103/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDIDI, CAROLE <hr/> 6 Contributor address; City; State; Zip Code WILLIAMSTOWN, NJ 08094	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Learning Disabilities Teacher-Consultant		9 Employer (See Instructions) Independent Contractor
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDIDI, CAROLE <hr/> Contributor address; City; State; Zip Code WILLIAMSTOWN, NJ 08094	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Learning Disabilities Teacher-Consultant		Employer (See Instructions) Independent Contractor
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDRESS, JILL <hr/> Contributor address; City; State; Zip Code Dunwoody, GA 30338	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CITIZEN, ANGELA <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85750	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Ami's Realty Services LLC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, GREG <hr/> Contributor address; City; State; Zip Code MACON, GA 31210	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/756 Rpt: 104/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, GREG <hr/> 6 Contributor address; City; State; Zip Code MACON, GA 31210	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) DESIGNER		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadunz, Edvige <hr/> Contributor address; City; State; Zip Code New York, NY 10026	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadunz, Edvige <hr/> Contributor address; City; State; Zip Code New York, NY 10026	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cady, Drew <hr/> Contributor address; City; State; Zip Code Del Mar, CA 92014	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FrmrArtsProducer/Retired		Employer (See Instructions) PhilSocietyOrangeCountyCA
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cahan, Linda <hr/> Contributor address; City; State; Zip Code King City, OR 97224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retail Design		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/756 Rpt: 105/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cain, Rachell <hr/> 6 Contributor address; City; State; Zip Code Hyattsville, MD 20782	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Tv		9 Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, Marguerite <hr/> Contributor address; City; State; Zip Code Houston, TX 77040	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Aubrey <hr/> Contributor address; City; State; Zip Code Houston, TX 77014	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Charlotte <hr/> Contributor address; City; State; Zip Code Goldsboro, NC 27534	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Gerald Ray <hr/> Contributor address; City; State; Zip Code Madison, WI 53705	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/756 Rpt: 106/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Sandra <hr/> 6 Contributor address; City; State; Zip Code Port Clinton, OH 43452	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campos, Lui <hr/> Contributor address; City; State; Zip Code Baton Rouge, LA 70810	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantine, Richard <hr/> Contributor address; City; State; Zip Code Rancho Palos Verdes, CA 90275	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantor, Miriam <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90019	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantor, Miriam <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/756 Rpt: 107/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capell, David <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90067	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caratti, Hannah <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95407	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caratti, Hannah <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95407	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caratti, Hannah <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95407	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caratti, Hannah <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95407	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/756 Rpt: 108/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caratti, Hannah	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Santa Rosa, CA 95407		
8 Principal occupation / Job title (See Instructions) Therapist		9 Employer (See Instructions) Self
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carey, Patricia	Amount of Contribution (\$) \$11.00
Contributor address; City; State; Zip Code Charter Twp of Clinton, MI 48038		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carey, Patricia	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Charter Twp of Clinton, MI 48038		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carey, Patricia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Charter Twp of Clinton, MI 48038		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carey, Patricia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Charter Twp of Clinton, MI 48038		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/756 Rpt: 109/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carleton, C Elaine <hr/> 6 Contributor address; City; State; Zip Code Denver, CO 80238	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) lawyer / rancher		9 Employer (See Instructions) Carleton Gotlin Law PC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Karan <hr/> Contributor address; City; State; Zip Code Bridgman, MI 49106	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlton, Claudia <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28270	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) PPD Inc
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carnahan, Billy <hr/> Contributor address; City; State; Zip Code Arlington, TX 76006	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carnahan, Billy <hr/> Contributor address; City; State; Zip Code Arlington, TX 76006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/756 Rpt: 110/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Marilyn	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Westfield, MA 01085		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Marilyn	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Westfield, MA 01085		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Marilyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Westfield, MA 01085		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Marilyn	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Westfield, MA 01085		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Marilyn	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Westfield, MA 01085		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/756 Rpt: 111/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carozza, Jill <hr/> 6 Contributor address; City; State; Zip Code Madison, WI 53717	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Front Desk Assistant		9 Employer (See Instructions) J.H. Findorff & Son Inc.
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carozza, Jill <hr/> Contributor address; City; State; Zip Code Madison, WI 53717	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Front Desk Assistant		Employer (See Instructions) J.H. Findorff & Son Inc.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Debbie <hr/> Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Susan <hr/> Contributor address; City; State; Zip Code Hockessin, DE 19707	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carreon, Pat <hr/> Contributor address; City; State; Zip Code Elgin, IL 60123	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/756 Rpt: 112/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carreon, Pat <hr/> 6 Contributor address; City; State; Zip Code Elgin, IL 60123	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Val <hr/> Contributor address; City; State; Zip Code Miami, FL 33155	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carson, Connie <hr/> Contributor address; City; State; Zip Code Wellington, KS 67152	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Althea <hr/> Contributor address; City; State; Zip Code Milpitas, CA 95035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Althea <hr/> Contributor address; City; State; Zip Code Milpitas, CA 95035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/756 Rpt: 113/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Bernard <hr/> 6 Contributor address; City; State; Zip Code Franklinville, NJ 08322	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) BKC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Frederick <hr/> Contributor address; City; State; Zip Code Sicklerville, NJ 08081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Loretha <hr/> Contributor address; City; State; Zip Code Clinton, NC 28328	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartin, Cheryl <hr/> Contributor address; City; State; Zip Code Folsom, CA 95630	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casalta, Lorrie <hr/> Contributor address; City; State; Zip Code Reno, NV 89502	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Preschool Teacher		Employer (See Instructions) Little Bear Preschool

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/756 Rpt: 114/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casey, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Nesquehoning, PA 18240	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cash, Thomas <hr/> Contributor address; City; State; Zip Code Asheville, NC 28801	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casson, Richard <hr/> Contributor address; City; State; Zip Code Golden, CO 80403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casson, Richard <hr/> Contributor address; City; State; Zip Code Golden, CO 80403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casson, Richard <hr/> Contributor address; City; State; Zip Code Golden, CO 80403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/756 Rpt: 115/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casson, Richard	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Golden, CO 80403		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casson, Richard	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Golden, CO 80403		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casson, Richard	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Golden, CO 80403		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castaneda, Ricardo	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75214		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) DallasISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castaneda, Ricardo	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75214		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) DallasISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/756 Rpt: 116/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castelino, Michael	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Boca Raton, FL 33433		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castelino, Michael	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Boca Raton, FL 33433		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castelino, Michael	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Boca Raton, FL 33433		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castelino, Michael	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Boca Raton, FL 33433		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castelino, Michael	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Boca Raton, FL 33433		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/756 Rpt: 117/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catalanotto, Mary	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Greenville, SC 29605		
8 Principal occupation / Job title (See Instructions) Psychothera;y		9 Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catalanotto, Mary	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Greenville, SC 29605		
Principal occupation / Job title (See Instructions) Psychothera;y		Employer (See Instructions) Self
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catalanotto, Mary	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Greenville, SC 29605		
Principal occupation / Job title (See Instructions) Psychothera;y		Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catten, Kit	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Salt Lake City, UT 84129		
Principal occupation / Job title (See Instructions) Cosmetologist		Employer (See Instructions) Self
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catten, Kit	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Salt Lake City, UT 84129		
Principal occupation / Job title (See Instructions) Cosmetologist		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/756 Rpt: 118/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catten, Kit	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Salt Lake City, UT 84129		
8 Principal occupation / Job title (See Instructions) Cosmetologist		9 Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catten, Kit	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Salt Lake City, UT 84129		
Principal occupation / Job title (See Instructions) Cosmetologist		Employer (See Instructions) Self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catten, Kit	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Salt Lake City, UT 84129		
Principal occupation / Job title (See Instructions) Cosmetologist		Employer (See Instructions) Self
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catten, Kit	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Salt Lake City, UT 84129		
Principal occupation / Job title (See Instructions) Cosmetologist		Employer (See Instructions) Self
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catten, Kit	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Salt Lake City, UT 84129		
Principal occupation / Job title (See Instructions) Cosmetologist		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/756 Rpt: 119/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catten, Kit	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Salt Lake City, UT 84129		
8 Principal occupation / Job title (See Instructions) Cosmetologist		9 Employer (See Instructions) Self
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catten, Kit	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Salt Lake City, UT 84129		
Principal occupation / Job title (See Instructions) Cosmetologist		Employer (See Instructions) Self
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catten, Kit	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Salt Lake City, UT 84129		
Principal occupation / Job title (See Instructions) Cosmetologist		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cauchi, Richard	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Wheat Ridge, CO 80033		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cauwenbergh, Keith	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Green Bay, WI 54313		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/756 Rpt: 120/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cauwenbergh, Keith <hr/> 6 Contributor address; City; State; Zip Code Green Bay, WI 54313	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cauwenbergh, Keith <hr/> Contributor address; City; State; Zip Code Green Bay, WI 54313	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cauwenbergh, Keith <hr/> Contributor address; City; State; Zip Code Green Bay, WI 54313	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cauwenbergh, Keith <hr/> Contributor address; City; State; Zip Code Green Bay, WI 54313	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cauwenbergh, Keith <hr/> Contributor address; City; State; Zip Code Green Bay, WI 54313	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/756 Rpt: 121/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavanagh, Annette	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Atlanta, GA 30329		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavanagh, Annette	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Atlanta, GA 30329		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cayton, Malinda	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Apex, NC 27539		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cayton, Malinda	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Apex, NC 27539		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cayton, Malinda	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Apex, NC 27539		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/756 Rpt: 122/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cayton, Malinda <hr/> 6 Contributor address; City; State; Zip Code Apex, NC 27539	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cayton, Malinda <hr/> Contributor address; City; State; Zip Code Apex, NC 27539	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cell, Sabrina <hr/> Contributor address; City; State; Zip Code Massapequa, NY 11758	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cerisano, Michele <hr/> Contributor address; City; State; Zip Code Freehold, NJ 07728	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cerisano, Michele <hr/> Contributor address; City; State; Zip Code Freehold, NJ 07728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/756 Rpt: 123/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cessna, Beth	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Asheville, NC 28804		
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Mars Hill University
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chakravorty, Sudeep	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Wexford, PA 15090		
Principal occupation / Job title (See Instructions) Psychiatrist		Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chalmers, Getchen	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Peoria, AZ 85383		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chalmers, Getchen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Peoria, AZ 85383		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chalmers, Getchen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Peoria, AZ 85383		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/756 Rpt: 124/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chamberlain, John <hr/> 6 Contributor address; City; State; Zip Code Sturgis, SD 57785	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Champney, Linda <hr/> Contributor address; City; State; Zip Code North Ogden, UT 84414-1227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Genevieve <hr/> Contributor address; City; State; Zip Code Leverett, MA 01054	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Joseph <hr/> Contributor address; City; State; Zip Code Lanham, MD 20706	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Sandy <hr/> Contributor address; City; State; Zip Code Tybee Island, GA 31328	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/756 Rpt: 125/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandrashekar, Alaiah <hr/> 6 Contributor address; City; State; Zip Code Troy, MI 48084	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) NTT Data
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Evette <hr/> Contributor address; City; State; Zip Code Somerset County, NJ 08873	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chang, Carolyn <hr/> Contributor address; City; State; Zip Code Mount Holly, NJ 08060	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapin, JoAnne <hr/> Contributor address; City; State; Zip Code Mesa, AZ 85209	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapin, JoAnne <hr/> Contributor address; City; State; Zip Code Mesa, AZ 85209	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chartier, Victor	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code tiffin, OH 44883		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, David	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Los Angeles, CA 90066		
Principal occupation / Job title (See Instructions) Film director		Employer (See Instructions) David Chase
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Virginia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Santa Barbara, CA 93105		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Virginia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Santa Barbara, CA 93105		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Virginia	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Santa Barbara, CA 93105		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/756 Rpt: 127/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Virginia <hr/> 6 Contributor address; City; State; Zip Code Santa Barbara, CA 93105	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Virginia <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93105	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Virginia <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Virginia <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Virginia <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/756 Rpt: 128/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Virginia	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Santa Barbara, CA 93105		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Virginia	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Santa Barbara, CA 93105		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Virginia	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Santa Barbara, CA 93105		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Virginia	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Santa Barbara, CA 93105		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Virginia	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Santa Barbara, CA 93105		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/756 Rpt: 129/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Virginia <hr/> 6 Contributor address; City; State; Zip Code Santa Barbara, CA 93105	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Virginia <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93105	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaset, Marjorie <hr/> Contributor address; City; State; Zip Code Rodeo, CA 94572	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) marriage and family therapist		Employer (See Instructions) self employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Tak Ming <hr/> Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chernek, Peter <hr/> Contributor address; City; State; Zip Code Newburgh, NY 12550	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Research		Employer (See Instructions) Cornell

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/756 Rpt: 130/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheshire, Lorrie <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98199	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chester, Dr. <hr/> Contributor address; City; State; Zip Code Hewitt, NJ 07421	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chester, Dr. <hr/> Contributor address; City; State; Zip Code Hewitt, NJ 07421	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chevalier, Dawn <hr/> Contributor address; City; State; Zip Code North Chelmsford, MA 01863	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiado, Juliana <hr/> Contributor address; City; State; Zip Code Palos Verdes, CA 90274	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/756 Rpt: 131/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiado, Juliana <hr/> 6 Contributor address; City; State; Zip Code Palos Verdes Estates, CA 90274	7 Amount of Contribution (\$) \$13.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiki, Paul <hr/> Contributor address; City; State; Zip Code Gary, IN 46403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chilton, Margaret <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chisholm, Kim <hr/> Contributor address; City; State; Zip Code St. John VI 00831 Virgin Islands, U.S.	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chopra, Anil <hr/> Contributor address; City; State; Zip Code Milpitas, CA 95035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Miss Abha's Daycare.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/756 Rpt: 132/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christel, Kellie	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code wheaton, IL 60189		
8 Principal occupation / Job title (See Instructions) physician assistant		9 Employer (See Instructions) iems
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christel, Kellie	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code wheaton, IL 60189		
Principal occupation / Job title (See Instructions) physician assistant		Employer (See Instructions) iems
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ciaverelli, Jim	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77043-4659		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cifor, John	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Orlando, FL 32804		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cirillo, Keith	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Seattle, WA 98117		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/756 Rpt: 133/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cirillo, Keith <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98117	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cirillo, Keith <hr/> Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ciulei, Rebecca <hr/> Contributor address; City; State; Zip Code Columbus, OH 43204	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Joan <hr/> Contributor address; City; State; Zip Code Holliston, MA 01746-1429	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Joan <hr/> Contributor address; City; State; Zip Code Holliston, MA 01746-1429	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/756 Rpt: 134/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Joan <hr/> 6 Contributor address; City; State; Zip Code Holliston, MA 01746-1429	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Kathy <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48103	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Kathy <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48103	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Sharon <hr/> Contributor address; City; State; Zip Code Oxnard, CA 93036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, William J. <hr/> Contributor address; City; State; Zip Code Powhatan, VA 23139	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 132/756 Rpt: 135/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clayton, Terry	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Nashville, TN 37207		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clayton, Terry	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Nashville, TN 37207		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clegg, Jerry	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Porter, IN 46304		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clelland, Robert	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code La Jolla, CA 92037		
Principal occupation / Job title (See Instructions) Investment Advisor		Employer (See Instructions) Clelland & Company
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clements, Helen	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Stillwater, OK 74074		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 133/756 Rpt: 136/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clevenger Sr., Glenn <hr/> 6 Contributor address; City; State; Zip Code Heiskell, TN 37754	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Close, Myla <hr/> Contributor address; City; State; Zip Code Nashville, TN 37220	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobo, Peter <hr/> Contributor address; City; State; Zip Code Roseville, CA 95747	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Amergis Healthcare Staffing
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobo, Peter <hr/> Contributor address; City; State; Zip Code Roseville, CA 95747	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Amergis Healthcare Staffing
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cochran, Karen <hr/> Contributor address; City; State; Zip Code Winter Park, FL 32792	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Philanthropy Innovators

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/756 Rpt: 137/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cody, Judy	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Boulder, CO 80302		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffer, John G	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Calabasas, CA 91302		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffman, Linda Burns	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Charlotte, NC 28270		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Edward	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Palm Beach Gardens, FL 33418-8000		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Sharon	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Oakland, CA 94618		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/756 Rpt: 138/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Sharon <hr/> 6 Contributor address; City; State; Zip Code Oakland, CA 94618	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Christina <hr/> Contributor address; City; State; Zip Code Laguna Beach, CA 92651	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Christina <hr/> Contributor address; City; State; Zip Code Laguna Beach, CA 92651	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Christina <hr/> Contributor address; City; State; Zip Code Laguna Beach, CA 92651	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Christina <hr/> Contributor address; City; State; Zip Code Laguna Beach, CA 92651	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/756 Rpt: 139/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Lucy <hr/> 6 Contributor address; City; State; Zip Code San Dimas, CA 91773	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Donald <hr/> Contributor address; City; State; Zip Code Eads, TN 38028	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Jim <hr/> Contributor address; City; State; Zip Code Bannockburn, IL 60015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Private Equity		Employer (See Instructions) Generation 3 Capital LLC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Jim <hr/> Contributor address; City; State; Zip Code Bannockburn, IL 60015	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Private Equity		Employer (See Instructions) Generation 3 Capital LLC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Perry <hr/> Contributor address; City; State; Zip Code baltimore, MD 21207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) IT Specialist		Employer (See Instructions) USA

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/756 Rpt: 140/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collazo, Crista <hr/> 6 Contributor address; City; State; Zip Code Durham, NC 27704	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Public defender office NC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coller, Craig <hr/> Contributor address; City; State; Zip Code Miami Beach, FL 33140	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Craig Coller
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collette, Frances C <hr/> Contributor address; City; State; Zip Code Boise, ID 83707	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Joseph <hr/> Contributor address; City; State; Zip Code Cold Spring, KY 41076	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Joseph <hr/> Contributor address; City; State; Zip Code Cold Spring, KY 41076	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Viki	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Goodrich, TX 77335		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Viki	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Goodrich, TX 77335		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Viki	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Goodrich, TX 77335		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Viki	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Goodrich, TX 77335		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Viki	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Goodrich, TX 77335		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 139/756 Rpt: 142/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Chad <hr/> 6 Contributor address; City; State; Zip Code Manhattan, NY 10017	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Self
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Stephen <hr/> Contributor address; City; State; Zip Code Woodland Hills, CA 91367	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Stephen <hr/> Contributor address; City; State; Zip Code Woodland Hills, CA 91367	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Stephen <hr/> Contributor address; City; State; Zip Code Woodland Hills, CA 91367	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collis, Arthur <hr/> Contributor address; City; State; Zip Code South Pasadena, CA 91030	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Coach & Hypnotist		Employer (See Instructions) Self employed

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conaty, Anne <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75025	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cone, Rita <hr/> Contributor address; City; State; Zip Code Midland, TX 79704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cone, Rita <hr/> Contributor address; City; State; Zip Code Midland, TX 79704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cone, Rita <hr/> Contributor address; City; State; Zip Code Midland, TX 79704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cone, Rita <hr/> Contributor address; City; State; Zip Code Midland, TX 79704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cone, Rita <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79704	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conklin, Robert <hr/> Contributor address; City; State; Zip Code Portland, OR 97201	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conklin, Robert <hr/> Contributor address; City; State; Zip Code Portland, OR 97201	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conners, Theresa <hr/> Contributor address; City; State; Zip Code Centralia, WA 98531	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conroy, Susan <hr/> Contributor address; City; State; Zip Code Knightdale, NC 27545	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 142/756 Rpt: 145/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conte, Peter	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Seattle, WA 98115		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conte, Peter	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Seattle, WA 98115		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contreras, Rebecca	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Placentia, CA 92870		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contreras, Rebecca	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Placentia, CA 92870		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contreras, Reyes	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Merced, CA 95341		
Principal occupation / Job title (See Instructions) Retail Sales		Employer (See Instructions) Big Creek lumber

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/756 Rpt: 146/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Christi <hr/> 6 Contributor address; City; State; Zip Code Evington, VA 24550	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Grant <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48113-0175	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Grant <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48113-0175	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, James <hr/> Contributor address; City; State; Zip Code SPRINGFIELD, MO 65804	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Carolyn E <hr/> Contributor address; City; State; Zip Code Newport BEach, CA 92660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/756 Rpt: 147/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Pam <hr/> 6 Contributor address; City; State; Zip Code Tallahassee, FL 32308	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Peggy <hr/> Contributor address; City; State; Zip Code Marietta, GA 30062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Susie <hr/> Contributor address; City; State; Zip Code Perkins, OK 74059	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Deborah <hr/> Contributor address; City; State; Zip Code Midlothian, VA 23112	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Deborah <hr/> Contributor address; City; State; Zip Code Midlothian, VA 23112	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Deborah <hr/> 6 Contributor address; City; State; Zip Code Midlothian, VA 23112	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Deborah <hr/> Contributor address; City; State; Zip Code Midlothian, VA 23112	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Deborah <hr/> Contributor address; City; State; Zip Code Midlothian, VA 23112	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbett, Beverly <hr/> Contributor address; City; State; Zip Code Naples, FL 34103	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corey, Curt <hr/> Contributor address; City; State; Zip Code Virginia Beach, VA 23451	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 146/756 Rpt: 149/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coria, Ana <hr/> 6 Contributor address; City; State; Zip Code LONG BEACH, CA 90808	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornter, Deborah <hr/> Contributor address; City; State; Zip Code langhorne, PA 19047	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornter, Deborah <hr/> Contributor address; City; State; Zip Code langhorne, PA 19047	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornter, Deborah <hr/> Contributor address; City; State; Zip Code langhorne, PA 19047	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortinas, Diana <hr/> Contributor address; City; State; Zip Code McAllen, TX 78504	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 147/756 Rpt: 150/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortte, Sharyn	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Burnsville, MN 55337		
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Bobalon Corp
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corwin, Amy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code South Londonderry, VT 05155		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Costa, Bob	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Reidsville, NC 27320		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cottrell, Dale	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Midlothian, VA 23112		
Principal occupation / Job title (See Instructions) Government		Employer (See Instructions) DLA-Aviation DSCR
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Carole	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Sequim, WA 98382		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/756 Rpt: 151/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, David <hr/> 6 Contributor address; City; State; Zip Code MoValley, IA 51555	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coyle, Carrie <hr/> Contributor address; City; State; Zip Code Blue Grass, IA 52726	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crabtree, Cornel <hr/> Contributor address; City; State; Zip Code Bronx, NY 10471	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) ethical culture fieldston school
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Genean <hr/> Contributor address; City; State; Zip Code Hollywood, FL 33019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravedi, A Paul <hr/> Contributor address; City; State; Zip Code Watertown, MA 02472	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Newton Executive Office center

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 149/756 Rpt: 152/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creel, James <hr/> 6 Contributor address; City; State; Zip Code North Platte, NE 69101	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Conductor		9 Employer (See Instructions) Upr
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cromwell, Courtney <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89117	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crow, Nancy <hr/> Contributor address; City; State; Zip Code Avon, OH 44011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley, Jean <hr/> Contributor address; City; State; Zip Code Oswego, IL 60543	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cullen, Sarah <hr/> Contributor address; City; State; Zip Code Portsmouth, NH 03801	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 150/756 Rpt: 153/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cumbie, Stephen <hr/> 6 Contributor address; City; State; Zip Code Vienna, VA 22182	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) NVCommercial Inc.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cummings, Bruce <hr/> Contributor address; City; State; Zip Code Cathedral City, CA 92234-1605	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cummins, Franklin <hr/> Contributor address; City; State; Zip Code Wichita, KS 67206	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Aerospace Engineer		Employer (See Instructions) Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cundiff, Warren <hr/> Contributor address; City; State; Zip Code Louisville, KY 40219	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cundiff, Warren <hr/> Contributor address; City; State; Zip Code Louisville, KY 40219	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 151/756 Rpt: 154/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Patrick <hr/> 6 Contributor address; City; State; Zip Code Tucson, AZ 85706	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curran, Deborah <hr/> Contributor address; City; State; Zip Code Salem, MA 01970	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Hospital Administration		Employer (See Instructions) Beth Israel Lahey Health
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Gregg <hr/> Contributor address; City; State; Zip Code Saint Paul, MN 55108	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Gregg <hr/> Contributor address; City; State; Zip Code Saint Paul, MN 55108	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtris, Bruce <hr/> Contributor address; City; State; Zip Code Huntington Beach, CA 92646	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) None

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 152/756 Rpt: 155/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cushing, Joseph <hr/> 6 Contributor address; City; State; Zip Code CRANBERRY TOWNSHIP, PA 16066	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cushman, Barbara <hr/> Contributor address; City; State; Zip Code Kailua Kona, HI 96740	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutler, Howard <hr/> Contributor address; City; State; Zip Code Portland, OR 97212-1839	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutler, Howard <hr/> Contributor address; City; State; Zip Code Portland, OR 97212-1839	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutler, Thomas <hr/> Contributor address; City; State; Zip Code Federal Way, WA 98023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) Enterprise

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 153/756 Rpt: 156/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutrona, Christine <hr/> 6 Contributor address; City; State; Zip Code La Quinta, CA 92253	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutrona, Christine <hr/> Contributor address; City; State; Zip Code La Quinta, CA 92253	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutrona, Christine <hr/> Contributor address; City; State; Zip Code La Quinta, CA 92253	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutrona, Christine <hr/> Contributor address; City; State; Zip Code La Quinta, CA 92253	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutrona, Christine <hr/> Contributor address; City; State; Zip Code La Quinta, CA 92253	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 154/756 Rpt: 157/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutting, Linda <hr/> 6 Contributor address; City; State; Zip Code Brookline, MA 02446	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Author		9 Employer (See Instructions) Candlewick Press
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutting, Linda <hr/> Contributor address; City; State; Zip Code Brookline, MA 02446	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Candlewick Press
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutting, Linda <hr/> Contributor address; City; State; Zip Code Brookline, MA 02446	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Candlewick Press
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutting, Linda <hr/> Contributor address; City; State; Zip Code Brookline, MA 02446	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Candlewick Press
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutting, Linda <hr/> Contributor address; City; State; Zip Code Brookline, MA 02446	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Candlewick Press

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 155/756 Rpt: 158/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutting, Linda <hr/> 6 Contributor address; City; State; Zip Code Brookline, MA 02446	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Author		9 Employer (See Instructions) Candlewick Press
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cyrus, Leo <hr/> Contributor address; City; State; Zip Code Baton Rouge, LA 70816	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Minister		Employer (See Instructions) New Hope Baptist Church
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Amato, Sally <hr/> Contributor address; City; State; Zip Code Washington, DC 20015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Orazio, JoAnn <hr/> Contributor address; City; State; Zip Code Queens, NY 11691	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Zurilla, Dean <hr/> Contributor address; City; State; Zip Code Dover, NH 03820	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONNELLY, CANDICE <hr/> 6 Contributor address; City; State; Zip Code new york, NY 10012	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUAG, EILEEN <hr/> Contributor address; City; State; Zip Code Redwood City, CA 94061	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUBNICOFF, ERNEST <hr/> Contributor address; City; State; Zip Code CARDIFF, CA 92007	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Enrolled Agent		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUBNICOFF, ERNEST <hr/> Contributor address; City; State; Zip Code CARDIFF, CA 92007	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Enrolled Agent		Employer (See Instructions) Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Da Veiga, Nada <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90064	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) VP Solution Engineering		Employer (See Instructions) New Relic

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 157/756 Rpt: 160/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dabdoub, David 6 Contributor address; City; State; Zip Code Centennial, CO 80015-3768	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Sr. Lead Project Management		9 Employer (See Instructions) Kyndryl
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dabdoub, David Contributor address; City; State; Zip Code Centennial, CO 80015-3768	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sr. Lead Project Management		Employer (See Instructions) Kyndryl
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dacayo, Lori Contributor address; City; State; Zip Code Sacramento, CA 95831	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Respiratory Therapist		Employer (See Instructions) Sutter Health
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dagle, Lois Contributor address; City; State; Zip Code GLOUCESTER, MA 01930	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darr, Jo Ann Contributor address; City; State; Zip Code Baytown, TX 77523	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 158/756 Rpt: 161/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dauerty, Barbara <hr/> 6 Contributor address; City; State; Zip Code Universal City, TX 78148-2806	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Physician Associate		9 Employer (See Instructions) Arthur Nagel Community Clinic
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daughters, Turpen <hr/> Contributor address; City; State; Zip Code Sun City, AZ 85351	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Salomon <hr/> Contributor address; City; State; Zip Code Frederick, MD 21702	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Salomon <hr/> Contributor address; City; State; Zip Code Frederick, MD 21702	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Abigail <hr/> Contributor address; City; State; Zip Code NYC, NY 10023	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 159/756 Rpt: 162/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Abigail <hr/> 6 Contributor address; City; State; Zip Code NYC, NY 10023	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Abigail <hr/> Contributor address; City; State; Zip Code NYC, NY 10023	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Abigail <hr/> Contributor address; City; State; Zip Code NYC, NY 10023	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Abigail <hr/> Contributor address; City; State; Zip Code NYC, NY 10023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Abigail <hr/> Contributor address; City; State; Zip Code NYC, NY 10023	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 160/756 Rpt: 163/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Abigail <hr/> 6 Contributor address; City; State; Zip Code NYC, NY 10023	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Abigail <hr/> Contributor address; City; State; Zip Code NYC, NY 10023	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Albert <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Albert <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Albert <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Albert <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75006	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Chet/Nancy <hr/> Contributor address; City; State; Zip Code Laguna Vista, TX 78578	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Devra <hr/> Contributor address; City; State; Zip Code Washington, DC 20002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Devra <hr/> Contributor address; City; State; Zip Code Washington, DC 20002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Devra <hr/> Contributor address; City; State; Zip Code Washington, DC 20002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 162/756 Rpt: 165/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Devra	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Washington, DC 20002		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Devra	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Washington, DC 20002		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Devra	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Washington, DC 20002		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Reiko	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Honolulu, HI 96826		
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Bank of Hawaii
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Reiko	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Honolulu, HI 96826		
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Bank of Hawaii

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 163/756 Rpt: 166/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davison, Marcia	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code South Portland, ME 04106		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Day, Gail	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Novato, CA 94945		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De La Torre, Aida	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Manteca, CA 95337		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De La Torre, Aida	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Manteca, CA 95337		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeArman, Melinda	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Antonio, TX 78261		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 164/756 Rpt: 167/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeFranco, Beatrice <hr/> 6 Contributor address; City; State; Zip Code Berwyn, IL 60402	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) business owner		9 Employer (See Instructions) self
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeFranco, Beatrice <hr/> Contributor address; City; State; Zip Code Berwyn, IL 60402	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions) self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVincent, Elise <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19111	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVore, Rosalie <hr/> Contributor address; City; State; Zip Code Fernandina Beach, FL 32034	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVore, Rosalie <hr/> Contributor address; City; State; Zip Code Fernandina Beach, FL 32034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 165/756 Rpt: 168/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean, Linda	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Bloomington, IN 47403-2818		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean, Linda	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Bloomington, IN 47403-2818		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean, Linda	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Bloomington, IN 47403-2818		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean, Linda	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Bloomington, IN 47403-2818		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean, Sheri	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code South Hamilton, MA 01982		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 166/756 Rpt: 169/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean, Sheri	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code South Hamilton, MA 01982	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Decker, Alan	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code columbus, OH 43214	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dektor, Lisa	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Tempe, AZ 85283	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Gilbert Public Schools
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delgado, Joe	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code MillsapMillsap, TX 76066	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delgado, Joseph L	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Bisbee, AZ 85603-4428	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 167/756 Rpt: 170/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delgado, Joseph L <hr/> 6 Contributor address; City; State; Zip Code Bisbee, AZ 85603-4428	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delia, Ret <hr/> Contributor address; City; State; Zip Code Portland, OR 97239	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Demetriades, Hope <hr/> Contributor address; City; State; Zip Code PASADENA, CA 91107	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROPERTY MANAGER/ EDUCATOR/ARTIST		Employer (See Instructions) SELF EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Demler, Robert <hr/> Contributor address; City; State; Zip Code Sonoma, CA 95476	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Demm, Stephen <hr/> Contributor address; City; State; Zip Code Richmond, VA 23219	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Hunton Andrews Kurth

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 168/756 Rpt: 171/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denney, Dennis <hr/> 6 Contributor address; City; State; Zip Code Lees Summit, MO 64064	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennis, Christopher <hr/> Contributor address; City; State; Zip Code Millsboro, DE 19966	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennis, Christopher <hr/> Contributor address; City; State; Zip Code Millsboro, DE 19966	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Depew, David <hr/> Contributor address; City; State; Zip Code Meadow Vista, CA 95722	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deraney, Marilyn <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98008	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 169/756 Rpt: 172/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deraney, Marilyn <hr/> 6 Contributor address; City; State; Zip Code Bellevue, WA 98008	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Desgroseillier, Patricia <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) Target
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Desgroseillier, Patricia <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) Target
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deshmukh, Kanchan <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20814	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Detlet, Kathleen <hr/> Contributor address; City; State; Zip Code Chatham Township, NJ 07928	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Co-Director Spiritual Center		Employer (See Instructions) Caldwell Dominicans

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 170/756 Rpt: 173/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devendorf, Tiffani Ann <hr/> 6 Contributor address; City; State; Zip Code Oceanside, CA 92057-8211	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devendorf, Tiffani Ann <hr/> Contributor address; City; State; Zip Code Oceanside, CA 92057-8211	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DiCarlo, Joseph <hr/> Contributor address; City; State; Zip Code West Berlin, NJ 08091	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DiNardo, Claudia and Bernard <hr/> Contributor address; City; State; Zip Code Erie, PA 16506	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diamond, Elyssa Lynne <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20906	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 171/756 Rpt: 174/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Agustin <hr/> 6 Contributor address; City; State; Zip Code Milton, NY 12020	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz-Cuevas, Teresita <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Frederick's
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Elaine <hr/> Contributor address; City; State; Zip Code Harwich, MA 02645	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickson, Calvin <hr/> Contributor address; City; State; Zip Code Port St. Lucie, FL 34953	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diehl, Robert <hr/> Contributor address; City; State; Zip Code West Palm Beach, FL 33410	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 172/756 Rpt: 175/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diggs, James	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Orlando, FL 32810		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillman, Virginia	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Dallas, TX 75252		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillon, Karen	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Smith River, CA 95567		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dimalanta, Angela	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Las Vegas, NV 89144		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) CCSD
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dimestico, Steve	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Laguna Woods, CA 92637		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 173/756 Rpt: 176/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dineen, Geraldine <hr/> 6 Contributor address; City; State; Zip Code Ashforf, CT 06278	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Regional School District 8
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dinh, Hoang <hr/> Contributor address; City; State; Zip Code Irvine, CA 92603	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Golf instructor		Employer (See Instructions) Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diquisto, Cheryl <hr/> Contributor address; City; State; Zip Code San Jose, CA 95118	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ditri, Jane <hr/> Contributor address; City; State; Zip Code Bradenton, FL 34207	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ditri, Jane <hr/> Contributor address; City; State; Zip Code Bradenton, FL 34207	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 174/756 Rpt: 177/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dixler, Kevin <hr/> 6 Contributor address; City; State; Zip Code Deerfield, IL 60015	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Law Office of Kevin L. Dixler
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dixler, Kevin <hr/> Contributor address; City; State; Zip Code Deerfield, IL 60015	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office of Kevin L. Dixler
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dixler, Kevin <hr/> Contributor address; City; State; Zip Code Deerfield, IL 60015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office of Kevin L. Dixler
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doll, Shirley <hr/> Contributor address; City; State; Zip Code San Jose, CA 95123-5338	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domingue, Sandra <hr/> Contributor address; City; State; Zip Code Buckeye, AZ 85396	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 175/756 Rpt: 178/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dominguez, Nieves <hr/> 6 Contributor address; City; State; Zip Code Tampa, FL 33626	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dominguez, Nieves <hr/> Contributor address; City; State; Zip Code Tampa, FL 33626	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dominguez, Nieves <hr/> Contributor address; City; State; Zip Code Tampa, FL 33626	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnenfield, Larry <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85260	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) contractor		Employer (See Instructions) LADCO
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donohue, John <hr/> Contributor address; City; State; Zip Code North Attleboro, MA 02760	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 176/756 Rpt: 179/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donohue, John <hr/> 6 Contributor address; City; State; Zip Code North Attleboro, MA 02760	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dooley, Winifred <hr/> Contributor address; City; State; Zip Code Burbank, CA 91505	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) Winifred Dooley
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dooley, Winifred <hr/> Contributor address; City; State; Zip Code Burbank, CA 91505	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) Winifred Dooley
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dooley, Winifred <hr/> Contributor address; City; State; Zip Code Burbank, CA 91505	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) Winifred Dooley
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dooley, Winifred <hr/> Contributor address; City; State; Zip Code Burbank, CA 91505	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) Winifred Dooley

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 177/756 Rpt: 180/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dooley, Winifred <hr/> 6 Contributor address; City; State; Zip Code Burbank, CA 91505	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) writer		9 Employer (See Instructions) Winifred Dooley
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorohovich, James <hr/> Contributor address; City; State; Zip Code Red Bank, NJ 07701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Client Service Supervisor		Employer (See Instructions) Paychex
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorsett, Averill <hr/> Contributor address; City; State; Zip Code Miami Shores, FL 33150-2228	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney/Administrator		Employer (See Instructions) Broward County
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorta, Oscar <hr/> Contributor address; City; State; Zip Code Plantation, FL 33317	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dostis, Robert <hr/> Contributor address; City; State; Zip Code Waterbury Center, VT 05677	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 178/756 Rpt: 181/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dostis, Robert <hr/> 6 Contributor address; City; State; Zip Code Waterbury Center, VT 05677	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doub, Jane <hr/> Contributor address; City; State; Zip Code Kirkwood, MO 63122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doub, Jane <hr/> Contributor address; City; State; Zip Code Kirkwood, MO 63122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doub, Jane <hr/> Contributor address; City; State; Zip Code Kirkwood, MO 63122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dougherty, Shaun <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19806	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 179/756 Rpt: 182/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dougherty, Shaun <hr/> 6 Contributor address; City; State; Zip Code Wilmington, DE 19806	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Musician		9 Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downs, Gloria <hr/> Contributor address; City; State; Zip Code Laurel, MD 20723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downs, Kristen <hr/> Contributor address; City; State; Zip Code Carrboro, NC 27510	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NC Dept of Environmental Quality
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draper, Pamela <hr/> Contributor address; City; State; Zip Code Lexington, KY 40515	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Clark County Schools KY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draper, Pamela <hr/> Contributor address; City; State; Zip Code Lexington, KY 40515	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Clark County Schools KY

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 180/756 Rpt: 183/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dresback, Denette <hr/> 6 Contributor address; City; State; Zip Code Meridian, ID 83646	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PM		9 Employer (See Instructions) CSI
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dreyer, Bruce Gary <hr/> Contributor address; City; State; Zip Code Oak Creek, WI 53154	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Recreation worker		Employer (See Instructions) MPS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duarte, Carmo <hr/> Contributor address; City; State; Zip Code Deer Park, NY 11729	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dubose, Charlene <hr/> Contributor address; City; State; Zip Code Casa Grande, AZ 85122	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duff, Patricia <hr/> Contributor address; City; State; Zip Code New Haven, CO 06511	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 181/756 Rpt: 184/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Karen <hr/> 6 Contributor address; City; State; Zip Code Menlo Park, CA 94025	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Karen <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunfrund, Sharon <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22315	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunfrund, Sharon <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22315	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunkel, Harold <hr/> Contributor address; City; State; Zip Code Norfolk, VA 23510	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Real Estate Sales		Employer (See Instructions) Harold Dunkel

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 182/756 Rpt: 185/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunkel, Harold 6 Contributor address; City; State; Zip Code Norfolk, VA 23510	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Real Estate Sales		9 Employer (See Instructions) Harold Dunkel
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunkel, Harold Contributor address; City; State; Zip Code Norfolk, VA 23510	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Real Estate Sales		Employer (See Instructions) Harold Dunkel
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunlap, Mary Contributor address; City; State; Zip Code St. Louis, MO 63121	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Elaine Contributor address; City; State; Zip Code Olympia, WA 98502-5196	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Elaine Contributor address; City; State; Zip Code Olympia, WA 98502-5196	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 183/756 Rpt: 186/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Michael <hr/> 6 Contributor address; City; State; Zip Code Kinston, NC 28501	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Dunn & Dalton Architects
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dupuis, Josephine <hr/> Contributor address; City; State; Zip Code St. Petersburg, FL 33701	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duvlaris, Mary <hr/> Contributor address; City; State; Zip Code Woodstock, GA 30188	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dwyer, Joanne <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11225	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dwyer, Joanne <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11225	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 184/756 Rpt: 187/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eckelman, Colin <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92131	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Northrop Grumman
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eckl, Jacqueline <hr/> Contributor address; City; State; Zip Code Rochester, NY 14610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Cynthia <hr/> Contributor address; City; State; Zip Code Stone Mountain, GA 30087	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, John <hr/> Contributor address; City; State; Zip Code Medina, TX 78055	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, John <hr/> Contributor address; City; State; Zip Code Center Line, MI 48015	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 185/756 Rpt: 188/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Mary	7 Amount of Contribution (\$) \$24.00
	6 Contributor address; City; State; Zip Code Marina, CA 93933	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Mary	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Marina, CA 93933	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Egbueze, Margaret	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Boston, MA 02131	
Principal occupation / Job title (See Instructions) Nursing		Employer (See Instructions) HSL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eggebrecht, Kathy	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Orange, CA 92869	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrlich, Heyward	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code New York, NY 10014	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 186/756 Rpt: 189/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elam, Jack	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Houston, TX 77007		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ElamLewis, Addie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Riviera Beach, FL 33404		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elenga, Sigrid E	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Bellevue, WA 98009-3406		
Principal occupation / Job title (See Instructions) Technical Editor		Employer (See Instructions) self
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elenga, Sigrid E	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Bellevue, WA 98009-3406		
Principal occupation / Job title (See Instructions) Technical Editor		Employer (See Instructions) self
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elias, Birgit	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Cortlandt Manor, NY 10567		
Principal occupation / Job title (See Instructions) Psychiatrist		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 187/756 Rpt: 190/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elkin, Irene <hr/> 6 Contributor address; City; State; Zip Code Evanston, IL 60201	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellen, Yvonne <hr/> Contributor address; City; State; Zip Code Swartz Creek, MI 48473	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellen, Yvonne <hr/> Contributor address; City; State; Zip Code Safety Harbor, FL 34695	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellen, Yvonne <hr/> Contributor address; City; State; Zip Code Swartz Creek, MI 48473	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellen, Yvonne <hr/> Contributor address; City; State; Zip Code Swartz Creek, MI 48473	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 188/756 Rpt: 191/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code Phoenix, AZ 85034		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Siclinda	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Roanoke, VA 24015		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Stockton, CA 95207		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Stockton, CA 95207		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Stockton, CA 95207		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 189/756 Rpt: 192/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara <hr/> 6 Contributor address; City; State; Zip Code Stockton, CA 95207	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara <hr/> Contributor address; City; State; Zip Code Stockton, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara <hr/> Contributor address; City; State; Zip Code Stockton, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara <hr/> Contributor address; City; State; Zip Code Stockton, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara <hr/> Contributor address; City; State; Zip Code Stockton, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 190/756 Rpt: 193/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara <hr/> 6 Contributor address; City; State; Zip Code Stockton, CA 95207	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara <hr/> Contributor address; City; State; Zip Code Stockton, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara <hr/> Contributor address; City; State; Zip Code Stockton, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara <hr/> Contributor address; City; State; Zip Code Stockton, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara <hr/> Contributor address; City; State; Zip Code Stockton, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 191/756 Rpt: 194/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara <hr/> 6 Contributor address; City; State; Zip Code Stockton, CA 95207	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara <hr/> Contributor address; City; State; Zip Code Stockton, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Barbara <hr/> Contributor address; City; State; Zip Code Stockton, CA 95207	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elmore-Barbee, Chiquita <hr/> Contributor address; City; State; Zip Code Kalamazoo, MI 49006	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enderle, Norman <hr/> Contributor address; City; State; Zip Code Verona, WI 53593	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 192/756 Rpt: 195/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engelter, Barbara <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97230	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engelter, Barbara <hr/> Contributor address; City; State; Zip Code Portland, OR 97230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, Ida <hr/> Contributor address; City; State; Zip Code Columbia, SC 29203	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epple, Melissa <hr/> Contributor address; City; State; Zip Code Santa Fe, NM 87505	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) Self
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epple, Melissa <hr/> Contributor address; City; State; Zip Code Santa Fe, NM 87505	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 193/756 Rpt: 196/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epple, Melissa <hr/> 6 Contributor address; City; State; Zip Code Santa Fe, NM 87505	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Healthcare		9 Employer (See Instructions) Self
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epple, Melissa <hr/> Contributor address; City; State; Zip Code Santa Fe, NM 87505	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) Self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Bill <hr/> Contributor address; City; State; Zip Code Huntington Beach, CA 92646	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernster, Nicholas <hr/> Contributor address; City; State; Zip Code Colorado Springs, CO 80904	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernster, Nicholas <hr/> Contributor address; City; State; Zip Code Colorado Springs, CO 80904	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 194/756 Rpt: 197/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estabrook, Helen	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Houston, TX 77019		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estabrook, Helen	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Houston, TX 77019		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estabrook, Helen	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Houston, TX 77019		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estabrook, Helen	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Houston, TX 77019		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estabrook, Helen	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Houston, TX 77019		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 195/756 Rpt: 198/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estabrook, Helen <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etkes, Donald <hr/> Contributor address; City; State; Zip Code Claremont, CA 91711-4501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etkes, Donald <hr/> Contributor address; City; State; Zip Code Claremont, CA 91711-4501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etkes, Donald <hr/> Contributor address; City; State; Zip Code Claremont, CA 91711-4501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etkes, Donald <hr/> Contributor address; City; State; Zip Code Claremont, CA 91711-4501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 196/756 Rpt: 199/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etkes, Donald <hr/> 6 Contributor address; City; State; Zip Code Claremont, CA 91711-4501	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Psychotherapist		9 Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Octavia <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11221	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Everette, Christopher <hr/> Contributor address; City; State; Zip Code Germantown, MD 20874	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Everette, Christopher <hr/> Contributor address; City; State; Zip Code Germantown, MD 20874	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) F Buchanan, Golnar <hr/> Contributor address; City; State; Zip Code Waterloo, IA 50701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) F Buchanan, Golnar	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Waterloo, IA 50701		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORTUNE, Jean	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Fort Myers, FL 33905		
Principal occupation / Job title (See Instructions) Owner/Manager		Employer (See Instructions) Lehigh Family Group
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabis, Naomi	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Las Vegas, NV 89103		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabis, Naomi	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Las Vegas, NV 89103		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabry, Deborah	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code White Sulphur Springs, WV 24986		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 198/756 Rpt: 201/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabry, Deborah <hr/> 6 Contributor address; City; State; Zip Code White Sulphur Springs, WV 24986	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fahs, Carol <hr/> Contributor address; City; State; Zip Code The Hills, TX 78738	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faison, Greta <hr/> Contributor address; City; State; Zip Code Washington, DC 20017-2210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Caseworker		Employer (See Instructions) DC Government
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faison, Greta <hr/> Contributor address; City; State; Zip Code Washington, DC 20017-2210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Caseworker		Employer (See Instructions) DC Government
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faison, Greta <hr/> Contributor address; City; State; Zip Code Washington, DC 20017-2210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Caseworker		Employer (See Instructions) DC Govt

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 199/756 Rpt: 202/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faison, Greta <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20017-2210	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Caseworker		9 Employer (See Instructions) DC Government
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fales, William <hr/> Contributor address; City; State; Zip Code AMES Iowa, IA 50014	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Patrick <hr/> Contributor address; City; State; Zip Code Waco, TX 76710	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Baylor University
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrell, Brian <hr/> Contributor address; City; State; Zip Code North Dighton, MA 02764	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Plumber		Employer (See Instructions) Local 12
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrell, Cynthia <hr/> Contributor address; City; State; Zip Code Lafayette Hill, PA 19444	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 200/756 Rpt: 203/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrell, Cynthia	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Lafayette Hill, PA 19444		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrell, Cynthia	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Lafayette Hill, PA 19444		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrell, Cynthia	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lafayette Hill, PA 19444		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fattig, Diane	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code sacramento, CA 95819		
Principal occupation / Job title (See Instructions) deposition reporter		Employer (See Instructions) self
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Featherstone, Brenda	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Washington, DC 20020		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 201/756 Rpt: 204/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Featherstone, Brenda <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20020	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fee, Bernadette <hr/> Contributor address; City; State; Zip Code Bayside, NY 11361	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fee, Bernadette <hr/> Contributor address; City; State; Zip Code Bayside, NY 11361	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fee, Bernadette <hr/> Contributor address; City; State; Zip Code Bayside, NY 11361	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fekete, Constance <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89102	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 202/756 Rpt: 205/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felkins, Gloria <hr/> 6 Contributor address; City; State; Zip Code Newcastle, CA 95658	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fenn, James <hr/> Contributor address; City; State; Zip Code West Valley City, UT 84128	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Thompson Manufacturing
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fera, Bill <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15238	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) EY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fera, Bill <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15238	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) EY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Jo Ann <hr/> Contributor address; City; State; Zip Code Davison, MI 48423	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 203/756 Rpt: 206/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, JoAnn	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Davison, MI 48423		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Lori	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Plantation, FL 33322		
Principal occupation / Job title (See Instructions) Directing Manager		Employer (See Instructions) Gross Mortgage
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fernandez, Mary Ann	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code San Jacinto, CA 92583		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fernandez, Mary Ann	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Jacinto, CA 92583		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Susan	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Portland, OR 97219		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 204/756 Rpt: 207/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferschke, Marguerite	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Douglas, MA 01516		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fiegenbaum, Darrell	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Higginsville, MO 64037		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fielder-Wells, Sylvia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code El paso, TX 79927		
Principal occupation / Job title (See Instructions) Health Care coach		Employer (See Instructions) RVOHEALTH
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fields, Sheila	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Pembroke, GA 31321		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fields, Sheila	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Pembroke, GA 31321		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 205/756 Rpt: 208/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fields, Sheila <hr/> 6 Contributor address; City; State; Zip Code Pembroke, GA 31321	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris <hr/> Contributor address; City; State; Zip Code New York, NY 10009	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris <hr/> Contributor address; City; State; Zip Code New York, NY 10009	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris <hr/> Contributor address; City; State; Zip Code New York, NY 10009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris <hr/> Contributor address; City; State; Zip Code New York, NY 10009	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 206/756 Rpt: 209/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code New York, NY 10009		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code New York, NY 10009		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code New York, NY 10009		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code New York, NY 10009		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code New York, NY 10009		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 207/756 Rpt: 210/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10009	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris <hr/> Contributor address; City; State; Zip Code New York, NY 10009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris <hr/> Contributor address; City; State; Zip Code New York, NY 10009	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris <hr/> Contributor address; City; State; Zip Code New York, NY 10009	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris <hr/> Contributor address; City; State; Zip Code New York, NY 10009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 208/756 Rpt: 211/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10009	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris <hr/> Contributor address; City; State; Zip Code New York, NY 10009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris <hr/> Contributor address; City; State; Zip Code New York, NY 10009	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris <hr/> Contributor address; City; State; Zip Code New York, NY 10009	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Doris <hr/> Contributor address; City; State; Zip Code New York, NY 10009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 209/756 Rpt: 212/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figliozzi, Dory <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10009	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finch, Amy <hr/> Contributor address; City; State; Zip Code Green Valley, AZ 85622	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finch, Amy <hr/> Contributor address; City; State; Zip Code Green Valley, AZ 85622	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finch, Amy <hr/> Contributor address; City; State; Zip Code Green Valley, AZ 85622	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finch, Amy <hr/> Contributor address; City; State; Zip Code Green Valley, AZ 85622	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 210/756 Rpt: 213/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finch, Amy	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Green Valley, AZ 85622		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finch, Amy	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Green Valley, AZ 85622		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finch, Amy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Green Valley, AZ 85622		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finch, Amy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GREEN VALLEY, AZ 85622		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finch, Amy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GREEN VALLEY, AZ 85622		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 211/756 Rpt: 214/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finch, Amy <hr/> 6 Contributor address; City; State; Zip Code GREEN VALLEY, AZ 85622	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Janice <hr/> Contributor address; City; State; Zip Code Warwick, RI 02886	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finger, Ann <hr/> Contributor address; City; State; Zip Code Castro Valley, CA 94546	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fink, Marjorie <hr/> Contributor address; City; State; Zip Code Granger, IN 46530	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Firestone, Susan <hr/> Contributor address; City; State; Zip Code New York, NY 10012	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 212/756 Rpt: 215/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Firestone, Susan	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code New York, NY 10012		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Firestone, Susan	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code New York, NY 10012		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Firestone, Susan	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code New York, NY 10012		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Firestone, Susan	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code New York, NY 10012		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Firestone, Susan	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code New York, NY 10012		
Principal occupation / Job title (See Instructions) Artist art therapist		Employer (See Instructions) self/semi-retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 213/756 Rpt: 216/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) First, Brad <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757-7536	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischbach, Christina <hr/> Contributor address; City; State; Zip Code Phoenix, AZ 85023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Jane <hr/> Contributor address; City; State; Zip Code Vancouver, WA 98661	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Monte <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94122	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Monte <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94122	Amount of Contribution (\$) \$4.20
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 214/756 Rpt: 217/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Monte <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94122	7 Amount of Contribution (\$) \$4.20
8 Principal occupation / Job title (See Instructions) Biochemist		9 Employer (See Instructions) self
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Paul <hr/> Contributor address; City; State; Zip Code Lakeland, FL 33805	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SECURITY		Employer (See Instructions) ALLIED UNIVERSAL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Paul <hr/> Contributor address; City; State; Zip Code Lakeland, FL 33805	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SECURITY		Employer (See Instructions) ALLIED UNIVERSAL
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Paul <hr/> Contributor address; City; State; Zip Code Lakeland, FL 33805	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SECURITY		Employer (See Instructions) ALLIED UNIVERSAL
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Shawn <hr/> Contributor address; City; State; Zip Code Fallbrook, CA 92028	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Acorns2OakTrees

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 215/756 Rpt: 218/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Susan <hr/> 6 Contributor address; City; State; Zip Code Boise, ID 83705	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired art teacher		9 Employer (See Instructions) none
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisk, Julie <hr/> Contributor address; City; State; Zip Code Cedar Springs, MI 49319	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisk, Julie <hr/> Contributor address; City; State; Zip Code Cedar Springs, MI 49319	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisscher, Monique <hr/> Contributor address; City; State; Zip Code Durham, NC 27707	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flaherty, Elaine <hr/> Contributor address; City; State; Zip Code Williamstown, MA 01267	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 216/756 Rpt: 219/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flaherty, Joan <hr/> 6 Contributor address; City; State; Zip Code MAYNARD, MA 01754	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) editor		9 Employer (See Instructions) self
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flaherty, Joan <hr/> Contributor address; City; State; Zip Code MAYNARD, MA 01754	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) editor		Employer (See Instructions) self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flaherty, Joan <hr/> Contributor address; City; State; Zip Code MAYNARD, MA 01754	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) editor		Employer (See Instructions) self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanter, Charlene S <hr/> Contributor address; City; State; Zip Code Honolulu, HI 96816	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Communications		Employer (See Instructions) Na Lei Aloha Foundation
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleishman, Francine <hr/> Contributor address; City; State; Zip Code Lido Beach, NY 11561	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 217/756 Rpt: 220/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Frances	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Lynnfield, MA 01940		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Julia	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Oakbrook Terrace, IL 60181		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Julia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Oakbrook Terrace, IL 60181		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Nancy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Whitehouse Station, NJ 08889		
Principal occupation / Job title (See Instructions) Clinical Research		Employer (See Instructions) Daiichi Sankyo
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Nancy	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Whitehouse Station, NJ 08889		
Principal occupation / Job title (See Instructions) Clinical Research		Employer (See Instructions) Daiichi Sankyo

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 218/756 Rpt: 221/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Nancy	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Whitehouse Station, NJ 08889		
8 Principal occupation / Job title (See Instructions) Clinical Research		9 Employer (See Instructions) Daiichi Sankyo
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Nancy	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Whitehouse Station, NJ 08889		
Principal occupation / Job title (See Instructions) Clinical Research		Employer (See Instructions) Daiichi Sankyo
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Nadine	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Boulder City, NV 89005		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Florio, Connie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Washington, DC 20008		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Florman, Cherie	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Indianola, IA 50125		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) City Gardens Inc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 219/756 Rpt: 222/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Florman, Cherie <hr/> 6 Contributor address; City; State; Zip Code Indianola, IA 50125	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) City Gardens Inc.
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, David <hr/> Contributor address; City; State; Zip Code San Diego, CA 92110	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Lesley <hr/> Contributor address; City; State; Zip Code Kingsburg, CA 93631	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Secretary		Employer (See Instructions) Robert Ford CRNA Prof Nursing Corp
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Patricia <hr/> Contributor address; City; State; Zip Code Lewes, DE 19958	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fordyce, Michael <hr/> Contributor address; City; State; Zip Code Baxter, MN 56425-3501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DSP		Employer (See Instructions) Artesian Homes LLC

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 220/756 Rpt: 223/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fordyce, Michael	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Baxter, MN 56425-3501		
8 Principal occupation / Job title (See Instructions) DSP		9 Employer (See Instructions) Artesian Homes LLC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forney, Francine	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Alexandria, VA 22314		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forney, Francine	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Alexandria, VA 22314		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foss, John	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Boise, ID 83714		
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) HP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Stanley	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Atlanta, GA 30337		
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Hollowell Foster & Herring

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 221/756 Rpt: 224/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Carol <hr/> 6 Contributor address; City; State; Zip Code Vancouver, WA 98683	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francinii, Glenn <hr/> Contributor address; City; State; Zip Code Peachtree Corners, GA 30092	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francinii, Glenn <hr/> Contributor address; City; State; Zip Code Peachtree Corners, GA 30092	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Ronald <hr/> Contributor address; City; State; Zip Code Aptos, CA 95003	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Foothill Deanza Community college District
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Ronald <hr/> Contributor address; City; State; Zip Code Aptos, CA 95003	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Foothill Deanza Community college District

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 222/756 Rpt: 225/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Sean <hr/> 6 Contributor address; City; State; Zip Code Lansdale, PA 19446	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Biotechnician		9 Employer (See Instructions) Merck
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Susan Francis <hr/> Contributor address; City; State; Zip Code Hancock, NH 03449-0307	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine <hr/> Contributor address; City; State; Zip Code Northbrook, IL 60062	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine <hr/> Contributor address; City; State; Zip Code Northbrook, IL 60062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine <hr/> Contributor address; City; State; Zip Code Northbrook, IL 60062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 223/756 Rpt: 226/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Northbrook, IL 60062		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Northbrook, IL 60062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Northbrook, IL 60062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Northbrook, IL 60062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Northbrook, IL 60062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 224/756 Rpt: 227/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Northbrook, IL 60062		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Northbrook, IL 60062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Northbrook, IL 60062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Northbrook, IL 60062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Northbrook, IL 60062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 225/756 Rpt: 228/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Northbrook, IL 60062		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Northbrook, IL 60062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Northbrook, IL 60062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Northbrook, IL 60062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Northbrook, IL 60062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 226/756 Rpt: 229/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine <hr/> 6 Contributor address; City; State; Zip Code Northbrook, IL 60062	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Elaine <hr/> Contributor address; City; State; Zip Code Northbrook, IL 60062	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franke, Sherry <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franke, Sherry <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fransioli, Frank <hr/> Contributor address; City; State; Zip Code Conifer, CO 80433	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 227/756 Rpt: 230/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeburn, Bob <hr/> 6 Contributor address; City; State; Zip Code Pullman, WA 99163	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeburn, Bob <hr/> Contributor address; City; State; Zip Code Pullman, WA 99163	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Jesse <hr/> Contributor address; City; State; Zip Code Richmond, CA 94804	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Steven <hr/> Contributor address; City; State; Zip Code Deerfield Beach, FL 33442	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Steven <hr/> Contributor address; City; State; Zip Code Deerfield Beach, FL 33442	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 228/756 Rpt: 231/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Steven <hr/> 6 Contributor address; City; State; Zip Code Deerfield Beach, FL 33442	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Steven <hr/> Contributor address; City; State; Zip Code Deerfield Beach, FL 33442	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Steven <hr/> Contributor address; City; State; Zip Code Deerfield Beach, FL 33442	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, William <hr/> Contributor address; City; State; Zip Code Nashville, TN 37202	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Freeman Webb Com
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, William <hr/> Contributor address; City; State; Zip Code Nashville, TN 37202	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Freeman Webb Com

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 229/756 Rpt: 232/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, William <hr/> 6 Contributor address; City; State; Zip Code Nashville, TN 37202	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Freeman Webb Com
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, William <hr/> Contributor address; City; State; Zip Code Nashville, TN 37202	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Freeman Webb Com
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, William <hr/> Contributor address; City; State; Zip Code Nashville, TN 37202	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Freeman Webb Com
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, William <hr/> Contributor address; City; State; Zip Code Nashville, TN 37202	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Freeman Webb Com
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fried, Janet <hr/> Contributor address; City; State; Zip Code New York, NY 10023	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 230/756 Rpt: 233/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman, Robin <hr/> 6 Contributor address; City; State; Zip Code Apex, NC 27539	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) HR		9 Employer (See Instructions) Spectraforce Technologies Inc
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedrich, JoAnn <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89108	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) NSHE
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisch, Harry <hr/> Contributor address; City; State; Zip Code Yorktown Heights, NY 10598	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisch, Harry <hr/> Contributor address; City; State; Zip Code Yorktown Heights, NY 10598	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fritsch, James <hr/> Contributor address; City; State; Zip Code Rochester, MN 55902	Amount of Contribution (\$) \$4.28
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 231/756 Rpt: 234/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fry, Edward <hr/> 6 Contributor address; City; State; Zip Code Petaluma, CA 94952	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fueyo, Rick <hr/> Contributor address; City; State; Zip Code Tampa, FL 33629	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Promotions		Employer (See Instructions) SpunkyFuel LLC
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furtwengler, Elizabeth R <hr/> Contributor address; City; State; Zip Code Olathe, KS 66062	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALE, JAMES <hr/> Contributor address; City; State; Zip Code Seattle, WA 98101	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALE, JAMES <hr/> Contributor address; City; State; Zip Code Seattle, WA 98101	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 232/756 Rpt: 235/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIGSBY, EDNA	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Los Angeles, CA 90047		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSS, PAULA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code RICHMOND, CA 94804		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaber, Pamela	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Montoursville, PA 17754		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Lycoming College
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gadsby, Monica	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Langhorne, PA 19047		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gadsby, Monica	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Langhorne, PA 19047		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 233/756 Rpt: 236/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gael, Maria <hr/> 6 Contributor address; City; State; Zip Code Anacortes, WA 98221	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaffey, Janet <hr/> Contributor address; City; State; Zip Code Pound Ridge, NY 10576	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Interior design		Employer (See Instructions) Self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galaang, Paz <hr/> Contributor address; City; State; Zip Code san jose, CA 95148	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Mark <hr/> Contributor address; City; State; Zip Code Roxboro, NC 27573	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Mark <hr/> Contributor address; City; State; Zip Code Roxboro, NC 27573	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 234/756 Rpt: 237/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Mark <hr/> 6 Contributor address; City; State; Zip Code Roxboro, NC 27573	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gandelman, Joyce <hr/> Contributor address; City; State; Zip Code Modesto, CA 95350	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office of Joyce M Gandelman
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Joseph <hr/> Contributor address; City; State; Zip Code SOUTH BERWICK, ME 03908-1840	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) AT&T Consulting
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Elida <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Kristi <hr/> Contributor address; City; State; Zip Code Fallbrook, CA 92028	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 235/756 Rpt: 238/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Marcial <hr/> 6 Contributor address; City; State; Zip Code Union Beach, NJ 07735	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Marcial <hr/> Contributor address; City; State; Zip Code Union Beach, NJ 07735	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Marcial <hr/> Contributor address; City; State; Zip Code Union Beach, NJ 07735	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Marcial <hr/> Contributor address; City; State; Zip Code Union Beach, NJ 07735	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gard, Marcia <hr/> Contributor address; City; State; Zip Code LAGUNA VISTA, TX 78578	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 236/756 Rpt: 239/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Cathy <hr/> 6 Contributor address; City; State; Zip Code West Palm Beach, FL 33407	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Juliet <hr/> Contributor address; City; State; Zip Code Cypress, CA 90630	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Los Alamitos USD
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Bruce <hr/> Contributor address; City; State; Zip Code Richland, WA 99354	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Bruce Garrett
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Christie R <hr/> Contributor address; City; State; Zip Code Ferndale, WA 98248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Robert <hr/> Contributor address; City; State; Zip Code Port Townsend, WA 98368	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 237/756 Rpt: 240/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Robert <hr/> 6 Contributor address; City; State; Zip Code Port Townsend, WA 98368	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Robert <hr/> Contributor address; City; State; Zip Code Port Townsend, WA 98368	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Robert <hr/> Contributor address; City; State; Zip Code Port Townsend, WA 98368	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Robert <hr/> Contributor address; City; State; Zip Code Port Townsend, WA 98368	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Robert <hr/> Contributor address; City; State; Zip Code Port Townsend, WA 98368	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 238/756 Rpt: 241/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Robert	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Port Townsend, WA 98368		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Robert	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Port Townsend, WA 98368		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Robert	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Port Townsend, WA 98368		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Robert	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Port Townsend, WA 98368		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Robert	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Port Townsend, WA 98368		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 239/756 Rpt: 242/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrow, Suzanne	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Webster, NY 14580		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrow, Suzanne	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Webster, NY 14580		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrow, Suzanne	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Webster, NY 14580		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrow, Suzanne	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Webster, NY 14580		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrow, Suzanne	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Webster, NY 14580		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 240/756 Rpt: 243/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrow, Suzanne <hr/> 6 Contributor address; City; State; Zip Code Webster, NY 14580	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garside, Barry <hr/> Contributor address; City; State; Zip Code Mission Viejo, CA 92692	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaworski, Jennifer <hr/> Contributor address; City; State; Zip Code Madison, WI 53719	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) IT Supervisor		Employer (See Instructions) UW Health
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gay, MaryAnn <hr/> Contributor address; City; State; Zip Code Cowan, TN 37318	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gay, MaryAnn <hr/> Contributor address; City; State; Zip Code Cowan, TN 37318	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 241/756 Rpt: 244/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaydos-Fedak, Nina	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code North Prairie, WI 53153		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaydos-Fedak, Nina	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code North Prairie, WI 53153		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gelbard, E	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Oxford, MS 38655		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gelbard, Sara	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Barryville, NY 12719		
Principal occupation / Job title (See Instructions) R E broker		Employer (See Instructions) The corcoran group
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerber, Andrea	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Deerfield, IL 60015		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 242/756 Rpt: 245/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerber, Andrea <hr/> 6 Contributor address; City; State; Zip Code Deerfield, IL 60015	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geringer, Carol <hr/> Contributor address; City; State; Zip Code Claremore, OK 74017	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) German, Sherry <hr/> Contributor address; City; State; Zip Code Lakeside, CA 92040	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ML consultant		Employer (See Instructions) Self-employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerstl, Jerry <hr/> Contributor address; City; State; Zip Code McFarland, WI 53558	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giancola, Louis <hr/> Contributor address; City; State; Zip Code Providence, RI 02906	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 243/756 Rpt: 246/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gianneschi III, Lawrence R	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Kennesaw, GA 30152		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gianneschi III, Lawrence R	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Kennesaw, GA 30152		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert, Alicia	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Brooker, FL 32622		
Principal occupation / Job title (See Instructions) Cultivation		Employer (See Instructions) AYR Wellness
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giles, Eddie M	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Corona, CA 92879		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giles, Eddie M	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code Corona, CA 92879		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 244/756 Rpt: 247/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giles, Eddie M <hr/> 6 Contributor address; City; State; Zip Code Corona, CA 92879	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillespie, Mary <hr/> Contributor address; City; State; Zip Code Boswell, AR 72556	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillespie, Mary <hr/> Contributor address; City; State; Zip Code Boswell, AR 72556	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillett, Edward <hr/> Contributor address; City; State; Zip Code Saint Petersburg, FL 33702	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) UnitedHealthcare
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillett, Edward <hr/> Contributor address; City; State; Zip Code Saint Petersburg, FL 33702	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) UnitedHealthcare

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SCHEDULE A1

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillett, Edward <hr/> 6 Contributor address; City; State; Zip Code Saint Petersburg, FL 33702	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) UnitedHealthcare
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillette, Patricia <hr/> Contributor address; City; State; Zip Code The Dalles, OR 97058	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Columbia Gorge ESD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillette, Patricia <hr/> Contributor address; City; State; Zip Code The Dalles, OR 97058	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Columbia Gorge ESD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilligan, Rex <hr/> Contributor address; City; State; Zip Code plain, WI 53577	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) not employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilmore, Alan H <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87107	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 246/756 Rpt: 249/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilmore, Alan H <hr/> 6 Contributor address; City; State; Zip Code Albuquerque, NM 87107	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilmore, Alan H <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87107	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilmore, Bonnie <hr/> Contributor address; City; State; Zip Code Wayne, NJ 07470	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) clinical data management		Employer (See Instructions) Novella
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilmore, Bonnie <hr/> Contributor address; City; State; Zip Code Wayne, NJ 07470	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) clinical data management		Employer (See Instructions) Novella
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giordano, Fred <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 247/756 Rpt: 250/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gladwell, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Goode, VA 24556	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) personal property appraiser		9 Employer (See Instructions) self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gleason, Karen <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55422	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gleason, Marnie <hr/> Contributor address; City; State; Zip Code Portland, OR 97209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) farmer		Employer (See Instructions) self
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glendinning, Jane Carol <hr/> Contributor address; City; State; Zip Code Latham, NY 12110	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glendinning, Jane Carol <hr/> Contributor address; City; State; Zip Code Latham, NY 12110	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 248/756 Rpt: 251/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gloege, William P <hr/> 6 Contributor address; City; State; Zip Code Santa Maria, CA 93455	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gloege, William P <hr/> Contributor address; City; State; Zip Code Santa Maria, CA 93455	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gobbell, Phyllis <hr/> Contributor address; City; State; Zip Code Nashville, TN 37205	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godwin, Michael <hr/> Contributor address; City; State; Zip Code Dublin, CA 94568	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Xerox
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gold, Barry <hr/> Contributor address; City; State; Zip Code Lake Mary, FL 32746	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 249/756 Rpt: 252/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldberg, Nancy <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90066	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden, Gloria <hr/> Contributor address; City; State; Zip Code Redwood City, CA 94062	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden, Kathleen <hr/> Contributor address; City; State; Zip Code Volcano, HI 96785	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden, Michael <hr/> Contributor address; City; State; Zip Code Denver, CO 80220-4543	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) Nordic Global Consulting
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golding, Kathy <hr/> Contributor address; City; State; Zip Code Littleton, CO 80130	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 250/756 Rpt: 253/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomes, Karyn <hr/> 6 Contributor address; City; State; Zip Code Hayward, CA 94544	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Clerical		9 Employer (See Instructions) Titan
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gontang, Allan <hr/> Contributor address; City; State; Zip Code San Diego, CA 92131	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Bernard <hr/> Contributor address; City; State; Zip Code Chula Vista, CA 91913	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Kathleen <hr/> Contributor address; City; State; Zip Code Sherwood, AR 72120	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Kathleen <hr/> Contributor address; City; State; Zip Code Sherwood, AR 72120	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 251/756 Rpt: 254/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Sherwood, AR 72120	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodgold, Alan <hr/> Contributor address; City; State; Zip Code Tarpon Springs, FL 34688	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodgold, Alan <hr/> Contributor address; City; State; Zip Code Tarpon Springs, FL 34688	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwell, L Newton <hr/> Contributor address; City; State; Zip Code Thousand Oaks, CA 91360	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) WoolerBrands
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwell, L Newton <hr/> Contributor address; City; State; Zip Code Thousand Oaks, CA 91360	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Wooler Brands

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 252/756 Rpt: 255/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwell, L Newton <hr/> 6 Contributor address; City; State; Zip Code Thousand Oaks, CA 91360	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) Wooler Brands
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwell, L Newton <hr/> Contributor address; City; State; Zip Code Thousand Oaks, CA 91360	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwell, L Newton <hr/> Contributor address; City; State; Zip Code Thousand Oaks, CA 91360	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorczyca, Susan <hr/> Contributor address; City; State; Zip Code Boise, ID 83703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Jane <hr/> Contributor address; City; State; Zip Code Indian Trail, NC 28079	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 253/756 Rpt: 256/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goreski, Lena <hr/> 6 Contributor address; City; State; Zip Code Herndon, VA 20170	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goreski, Lena <hr/> Contributor address; City; State; Zip Code Herndon, VA 20170	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goreski, Lena <hr/> Contributor address; City; State; Zip Code Herndon, VA 20170	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goreski, Lena <hr/> Contributor address; City; State; Zip Code Herndon, VA 20170	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goreski, Lena <hr/> Contributor address; City; State; Zip Code Herndon, VA 20170	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 254/756 Rpt: 257/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorgas, Carolyn <hr/> 6 Contributor address; City; State; Zip Code Jamestown, CA 95327	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, cornelia <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) scientist		Employer (See Instructions) pharmalex
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorndt, Jean <hr/> Contributor address; City; State; Zip Code East Springfield, PA 16411	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gornick, Todd <hr/> Contributor address; City; State; Zip Code Shenandoah, TX 77384	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gornick, Todd <hr/> Contributor address; City; State; Zip Code Shenandoah, TX 77384	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 255/756 Rpt: 258/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorzny, Ted <hr/> 6 Contributor address; City; State; Zip Code Riverside County, CA 92549	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gossett, Gloria <hr/> Contributor address; City; State; Zip Code Pleasanton, CA 94588	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gossett, Gloria <hr/> Contributor address; City; State; Zip Code Pleasanton, CA 94588	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gossett, Gloria <hr/> Contributor address; City; State; Zip Code Pleasanton, CA 94588	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gossett, Gloria <hr/> Contributor address; City; State; Zip Code Pleasanton, CA 94588	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 256/756 Rpt: 259/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gotowko, Peter <hr/> 6 Contributor address; City; State; Zip Code Waco, TX 76705	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goudelock, Gloria <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30349	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grace, kathy <hr/> Contributor address; City; State; Zip Code Boulder, CO 80304	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grady, Mamie <hr/> Contributor address; City; State; Zip Code Chicago, IL 60653	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Kertrina <hr/> Contributor address; City; State; Zip Code Florence, SC 29501	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Limestone University

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 257/756 Rpt: 260/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grantham, Daniel	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Haiku, HI 96708		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grantham, Daniel	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code Haiku, HI 96708		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grantham, Daniel	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Haiku, HI 96708		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grantham, Daniel	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Haiku, HI 96708		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grantham, Daniel	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Haiku, HI 96708		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 258/756 Rpt: 261/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grantham, Daniel	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Haiku, HI 96708		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graudons, Adrienne	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Naples, NY 14512		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Glen	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Palisade, CO 81526		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Melinda	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Santa Monica, CA 90402		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Melinda	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Santa Monica, CA 90402		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 259/756 Rpt: 262/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grayling, Rowan <hr/> 6 Contributor address; City; State; Zip Code LOVELAND, OH 45140	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) P&G
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grazier, Jackie <hr/> Contributor address; City; State; Zip Code Fresno, CA 93727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Sun-Maid
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Chris <hr/> Contributor address; City; State; Zip Code Gainesville, VA 20155	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Noblis-ESI
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Sandra <hr/> Contributor address; City; State; Zip Code Miami, FL 33179	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Sarah <hr/> Contributor address; City; State; Zip Code Rayville, LA 71269	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 260/756 Rpt: 263/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenglass, Anne <hr/> 6 Contributor address; City; State; Zip Code Newark, DE 19711	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenwell, Margaret <hr/> Contributor address; City; State; Zip Code Clarksville, MO 63336	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Furniture maker		Employer (See Instructions) Margaret greenwell
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregersen, Sherrilyn <hr/> Contributor address; City; State; Zip Code Whitewater, CO 81527-9442	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, Paul <hr/> Contributor address; City; State; Zip Code Miami, FL 33193	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, Paul <hr/> Contributor address; City; State; Zip Code Miami, FL 33193	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 261/756 Rpt: 264/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, Paul <hr/> 6 Contributor address; City; State; Zip Code Miami, FL 33193	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, Paul <hr/> Contributor address; City; State; Zip Code Miami, FL 33193	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, Paul <hr/> Contributor address; City; State; Zip Code Miami, FL 33193	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gren, Conrad <hr/> Contributor address; City; State; Zip Code Damascus, OR 97088	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Reference Checker		Employer (See Instructions) Oregon Conference of SDA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gren, Conrad <hr/> Contributor address; City; State; Zip Code Damascus, OR 97088	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Reference Checker		Employer (See Instructions) Oregon Conference of SDA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 262/756 Rpt: 265/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffis, Linda <hr/> 6 Contributor address; City; State; Zip Code Middleburg, FL 32068-4631	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grigsby, Jim <hr/> Contributor address; City; State; Zip Code Ward, CO 80481-9529	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NEUROSCIENTIST		Employer (See Instructions) UNIVERSITY OF COLORADO DENVER
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grim, John <hr/> Contributor address; City; State; Zip Code Woodbridge, CT 06525	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Nancy <hr/> Contributor address; City; State; Zip Code Nashville, TN 37220	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Groobin, Kathryn <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90406	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Tutor/Singer		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 263/756 Rpt: 266/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Groobin, Kathryn <hr/> 6 Contributor address; City; State; Zip Code Santa Monica, CA 90406	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Tutor/Singer		9 Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Groobin, Kathryn <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90406	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Tutor/Singer		Employer (See Instructions) Self
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gross, Amy <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grosskopf, Mary Kay <hr/> Contributor address; City; State; Zip Code Wausau, WI 54401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN BSN OCN		Employer (See Instructions) Marshfield Clinic
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gruenloh, Kathy <hr/> Contributor address; City; State; Zip Code Decatur, IL 62521	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 264/756 Rpt: 267/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gruenloh, Kathy <hr/> 6 Contributor address; City; State; Zip Code Decatur, IL 62521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gryglas, Paul <hr/> Contributor address; City; State; Zip Code Delray Beach, FL 33445	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions) Bloomingdale's
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerry, Debbie <hr/> Contributor address; City; State; Zip Code Mount pleasant, SC 29464	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Housewife		Employer (See Instructions) Husband
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guice, Susan <hr/> Contributor address; City; State; Zip Code Biloxi, MS 39530	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Self
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guith, Thomas <hr/> Contributor address; City; State; Zip Code Troy, MI 48098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 265/756 Rpt: 268/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gulick, Stephen <hr/> 6 Contributor address; City; State; Zip Code Philadelphia, PA 19130	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) college professor		9 Employer (See Instructions) Comm. Coll. of Phila
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gulick, Stephen <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19130	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) college professor		Employer (See Instructions) Comm. Coll. of Phila
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gulick, Stephen <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19130	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) college professor		Employer (See Instructions) Comm. Coll. of Phila
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gulick, Stephen <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) college professor		Employer (See Instructions) Comm. Coll. of Phila
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Maria <hr/> Contributor address; City; State; Zip Code West Covina, CA 91790	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 266/756 Rpt: 269/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guyton, Sam <hr/> 6 Contributor address; City; State; Zip Code Lakewood, CO 80215	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gygi, Ann <hr/> Contributor address; City; State; Zip Code Anacortes, WA 98221	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, john <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95403	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYES, JAMES <hr/> Contributor address; City; State; Zip Code Holbrook, NY 11741	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELFMAN, LAURA <hr/> Contributor address; City; State; Zip Code Marshall, NC 28753	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 267/756 Rpt: 270/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haber, Kelly <hr/> 6 Contributor address; City; State; Zip Code Waynesboro, VA 22980	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haberman, Phyllis <hr/> Contributor address; City; State; Zip Code New York, NY 10024	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haddad-Mullen, Corinne <hr/> Contributor address; City; State; Zip Code Watertown, CT 06795	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) District Sales Manager		Employer (See Instructions) Clean Harbors
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haddad-Mullen, Corinne <hr/> Contributor address; City; State; Zip Code Watertown, CT 06795	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) District Sales Manager		Employer (See Instructions) Clean Harbors
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haddad-Mullen, Corinne <hr/> Contributor address; City; State; Zip Code Watertown, CT 06795	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) District Sales Manager		Employer (See Instructions) Clean Harbors

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 268/756 Rpt: 271/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haddad-Mullen, Corinne <hr/> 6 Contributor address; City; State; Zip Code Watertown, CT 06795	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) District Sales Manager		9 Employer (See Instructions) Clean Harbors
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadley, Aurelia <hr/> Contributor address; City; State; Zip Code MOUNT VERNON, WA 98274	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagmann, Juli <hr/> Contributor address; City; State; Zip Code Altoona, WI 54720	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haight Ganson, Donna <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Bruce <hr/> Contributor address; City; State; Zip Code Bremerton, WA 98337	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) College Professor		Employer (See Instructions) Olympic College

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 269/756 Rpt: 272/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Grace <hr/> 6 Contributor address; City; State; Zip Code Philadelphia, PA 19131	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ron <hr/> Contributor address; City; State; Zip Code Dayton, OH 45420	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Retired
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Rose <hr/> Contributor address; City; State; Zip Code Humble, TX 77346	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall-McMurtrie, marcella <hr/> Contributor address; City; State; Zip Code Everett, WA 98203	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall-McMurtrie, marcella <hr/> Contributor address; City; State; Zip Code Everett, WA 98203	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 270/756 Rpt: 273/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hallowell, Elizabeth	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Santa Barbara, CA 93105		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halpin-Healy, Timothy	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Manhattan, NY 10027		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Barnard College
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hambrecht, Carol	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Kansas City, MO 64113		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Joseph	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Nashville, TN 37215		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammers, Frances	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Louisville, KY 40206		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 271/756 Rpt: 274/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammond, George <hr/> 6 Contributor address; City; State; Zip Code Bridgeport, PA 19405	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Food delivery		9 Employer (See Instructions) FWOT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammond, George <hr/> Contributor address; City; State; Zip Code Bridgeport, PA 19405	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammond, George <hr/> Contributor address; City; State; Zip Code Bridgeport, PA 19405	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamrin, Neil <hr/> Contributor address; City; State; Zip Code Eden Prairie, MN 55344	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handmaker, Nancy <hr/> Contributor address; City; State; Zip Code Corrales, NM 87048	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 272/756 Rpt: 275/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanna, James <hr/> 6 Contributor address; City; State; Zip Code Oxnard, CA 93035-3145	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanna, James <hr/> Contributor address; City; State; Zip Code Oxnard, CA 93035-3145	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Robert <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Robert <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanz, Paul L. <hr/> Contributor address; City; State; Zip Code MANTECA, CA 95336-5129	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 273/756 Rpt: 276/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanz, Paul L.	7 Amount of Contribution (\$) \$24.00
	6 Contributor address; City; State; Zip Code MANTECA, CA 95336-5129	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanz, Paul L.	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code MANTECA, CA 95336-5129	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanz, Paul L.	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code MANTECA, CA 95336-5129	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haramis, Linn	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Park Ridge, IL 60068	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Molly	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Nantucket, MA 02554	
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Nantucket Cottage Hospital

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 274/756 Rpt: 277/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardington, Gloria <hr/> 6 Contributor address; City; State; Zip Code Rocky River, OH 44116	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Real estate agent		9 Employer (See Instructions) Self employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardy, Gail <hr/> Contributor address; City; State; Zip Code Hermitage, TN 37076	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harnden, Ralph <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85713-6419	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Miriam <hr/> Contributor address; City; State; Zip Code Arlington, VA 22203	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Andrea <hr/> Contributor address; City; State; Zip Code White Marsh, VA 23183	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 275/756 Rpt: 278/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Clovis, CA 93611	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Elizabeth <hr/> Contributor address; City; State; Zip Code Clovis, CA 93611	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Larry <hr/> Contributor address; City; State; Zip Code Albany, GA 31708	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Lisa <hr/> Contributor address; City; State; Zip Code Temecula, CA 92591	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Mike <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22314	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 276/756 Rpt: 279/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Mike <hr/> 6 Contributor address; City; State; Zip Code Alexandria, VA 22314	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Mike <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22314	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Mike <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22314	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Mike <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22314	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Mike <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22314	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 277/756 Rpt: 280/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Nancy	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Seneca, SC 29672-2412		
8 Principal occupation / Job title (See Instructions) Tennis Coach		9 Employer (See Instructions) Clemson University
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Sandra	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code New York, NY 10025		
Principal occupation / Job title (See Instructions) Risk Management		Employer (See Instructions) Federal Reserve Bank
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Sandra	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code New York, NY 10025		
Principal occupation / Job title (See Instructions) Risk Management		Employer (See Instructions) Federal Reserve Bank
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Sandra	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code New York, NY 10025		
Principal occupation / Job title (See Instructions) Risk Management		Employer (See Instructions) Federal Reserve Bank
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Sandra	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code New York, NY 10025		
Principal occupation / Job title (See Instructions) Risk Management		Employer (See Instructions) Federal Reserve Bank

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 278/756 Rpt: 281/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Sandra <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10025	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Risk Management		9 Employer (See Instructions) Federal Reserve Bank
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Sandra <hr/> Contributor address; City; State; Zip Code New York, NY 10025	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Risk Management		Employer (See Instructions) Federal Reserve Bank
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Lauren <hr/> Contributor address; City; State; Zip Code Emmetsburg, IA 50536	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Berl <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02138	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Dan <hr/> Contributor address; City; State; Zip Code Nashville, IN 47448	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 279/756 Rpt: 282/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Dan	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Nashville, IN 47448		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Dan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Nashville, IN 47448		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Dennis W.	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code York Haven, PA 17370		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, John	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Hatfield, PA 19440-4105		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, John	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Hatfield, PA 19440-4105		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 280/756 Rpt: 283/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harvey, Daniel <hr/> 6 Contributor address; City; State; Zip Code Fountainville, PA 18923	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harvey, Richard <hr/> Contributor address; City; State; Zip Code Savoy, IL 61874	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harwell, Audwin <hr/> Contributor address; City; State; Zip Code Shelby County, TN 38016	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasty, Sherry <hr/> Contributor address; City; State; Zip Code Watauga, TX 76148	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Director of Services		Employer (See Instructions) Sherwood Enterprises
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatcher-Kay, Carrie <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48103	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) psychologist		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 281/756 Rpt: 284/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hathaway, Sharol <hr/> 6 Contributor address; City; State; Zip Code Rockfield, KY 42274	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hathorn Jr, Booker T <hr/> Contributor address; City; State; Zip Code St. Louis, MO 63136	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauber, Susan <hr/> Contributor address; City; State; Zip Code Staten Island, NY 10309-2820	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haubold, Mary <hr/> Contributor address; City; State; Zip Code Topeka, KS 66614	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauptman, Elizabeth <hr/> Contributor address; City; State; Zip Code Englewood, CO 80110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 282/756 Rpt: 285/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Susan	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Memphis, TN 38117		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Susan	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Memphis, TN 38117		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Susan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Memphis, TN 38117		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Susan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Memphis, TN 38117		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayduk, Mary Lou	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Macomb, MI 48042		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 283/756 Rpt: 286/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Joseph	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Custer City, OK 73639		
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Clinton PS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes Walker, Marsha	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Grand Prairie, TX 75050		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes Walker, Marsha	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Grand Prairie, TX 75050		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, David	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Wrightsville, PA 17368		
Principal occupation / Job title (See Instructions) Chef Teacher		Employer (See Instructions) Self
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, Lathe	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Pittsburgh, PA 15206		
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 284/756 Rpt: 287/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayward, Diane <hr/> 6 Contributor address; City; State; Zip Code Hopkinton, MA 01748	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Contract Administrator		9 Employer (See Instructions) F.W. Madigan Company Inc.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hazel, Brenda <hr/> Contributor address; City; State; Zip Code Boys, MD 20841	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heacock, Anne <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48103	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hederman, Thomas <hr/> Contributor address; City; State; Zip Code St. Louis, MO 63104	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Datamax
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heid, Janice <hr/> Contributor address; City; State; Zip Code Peoria, AZ 85383-2661	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 285/756 Rpt: 288/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heisser, Trent <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78231	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Pharmacist		9 Employer (See Instructions) CVS HEALTH
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helinski, Cynthia <hr/> Contributor address; City; State; Zip Code Westminster, CO 80234	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Disability analyst		Employer (See Instructions) Nys otda
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helman, Kenneth <hr/> Contributor address; City; State; Zip Code Goodyear, AZ 85395	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Executive Coach		Employer (See Instructions) Self
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hennen, Christina <hr/> Contributor address; City; State; Zip Code Fairview, WV 26570	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hennen, Christina <hr/> Contributor address; City; State; Zip Code Fairview, WV 26570	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 286/756 Rpt: 289/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hennen, Christina	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Fairview, WV 26570		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hennen, Christina	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fairview, WV 26570		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henning, Jean	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Morrisonville, WI 53571		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Mary Ellen	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Athens, NY 12015		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Mary Ellen	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Athens, NY 12015		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 287/756 Rpt: 290/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Mary Ellen <hr/> 6 Contributor address; City; State; Zip Code Athens, NY 12015	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Mary Ellen <hr/> Contributor address; City; State; Zip Code Athens, NY 12015	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Mary Ellen <hr/> Contributor address; City; State; Zip Code Athens, NY 12015	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Mary Ellen <hr/> Contributor address; City; State; Zip Code Athens, NY 12015	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Mary Ellen <hr/> Contributor address; City; State; Zip Code Athens, NY 12015	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 288/756 Rpt: 291/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herberg, Craig	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Fairfax, VA 22032		
8 Principal occupation / Job title (See Instructions) It consultant		9 Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herbertson, Phyllis	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Albuquerque, NM 87120		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Mark	Amount of Contribution (\$) \$33.00
Contributor address; City; State; Zip Code Traverse City, MI 49684		
Principal occupation / Job title (See Instructions) Sole Owner Financial Advisor		Employer (See Instructions) self sole up north financial llc
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Mark	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Traverse City, MI 49684		
Principal occupation / Job title (See Instructions) Sole Owner Financial Advisor		Employer (See Instructions) self sole up north financial llc
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Mark	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Traverse City, MI 49684		
Principal occupation / Job title (See Instructions) Sole Owner Financial Advisor		Employer (See Instructions) self sole up north financial llc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 289/756 Rpt: 292/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Mark <hr/> 6 Contributor address; City; State; Zip Code Traverse City, MI 49684	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Sole Owner Financial Advisor		9 Employer (See Instructions) self sole up north financial llc
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Mark <hr/> Contributor address; City; State; Zip Code Traverse City, MI 49684	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) Sole Owner Financial Advisor		Employer (See Instructions) self sole up north financial llc
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Mark <hr/> Contributor address; City; State; Zip Code Traverse City, MI 49684	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sole Owner Financial Advisor		Employer (See Instructions) self sole up north financial llc
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Mark <hr/> Contributor address; City; State; Zip Code Traverse City, MI 49684	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sole Owner Financial Advisor		Employer (See Instructions) self sole up north financial llc
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Mark <hr/> Contributor address; City; State; Zip Code Traverse City, MI 49684	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Sole Owner Financial Advisor		Employer (See Instructions) self sole up north financial llc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 290/756 Rpt: 293/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Mark <hr/> 6 Contributor address; City; State; Zip Code Traverse City, MI 49684	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Sole Owner Financial Advisor		9 Employer (See Instructions) self sole up north financial llc
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Mark <hr/> Contributor address; City; State; Zip Code Traverse City, MI 49684	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sole Owner Financial Advisor		Employer (See Instructions) self sole up north financial llc
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Mark <hr/> Contributor address; City; State; Zip Code Traverse City, MI 49684	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) Sole Owner Financial Advisor		Employer (See Instructions) self sole up north financial llc
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herndon, Chad <hr/> Contributor address; City; State; Zip Code Fire Island Pines, NY 11782	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hersch, Judith <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90277	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Business Coach		Employer (See Instructions) Judy Hersch

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 291/756 Rpt: 294/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herzog, Joanne <hr/> 6 Contributor address; City; State; Zip Code Louisiana, MO 63353	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hess, Janet <hr/> Contributor address; City; State; Zip Code Warren, MI 48090	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hetherington, William <hr/> Contributor address; City; State; Zip Code South Dennis, MA 02660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heusner, Donna <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28277	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Cpc		Employer (See Instructions) Atrium
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heusner, Donna <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28277	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Cpc		Employer (See Instructions) Atrium

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 292/756 Rpt: 295/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickerson, Todd <hr/> 6 Contributor address; City; State; Zip Code Manchester, NH 03104	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Peer Specialist		9 Employer (See Instructions) Healthcare
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickerson, Todd <hr/> Contributor address; City; State; Zip Code Manchester, NH 03104	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Peer Specialist		Employer (See Instructions) Healthcare
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickerson, Todd <hr/> Contributor address; City; State; Zip Code Manchester, NH 03104	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Peer Specialist		Employer (See Instructions) Healthcare
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickerson, Todd <hr/> Contributor address; City; State; Zip Code Manchester, NH 03104	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Peer Specialist		Employer (See Instructions) Healthcare
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Maureen <hr/> Contributor address; City; State; Zip Code Stanton, MI 48888	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 293/756 Rpt: 296/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Highsmith, Eustacia <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90026	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Barbara <hr/> Contributor address; City; State; Zip Code San Benito, TX 78586	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Monte <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94116	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Mixologist		Employer (See Instructions) Bon Appetit
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Rodney <hr/> Contributor address; City; State; Zip Code Grass Valley, CA 95949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Rodney <hr/> Contributor address; City; State; Zip Code Grass Valley, CA 95949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 294/756 Rpt: 297/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Rodney <hr/> 6 Contributor address; City; State; Zip Code Grass Valley, CA 95949	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Rodney <hr/> Contributor address; City; State; Zip Code Grass Valley, CA 95949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Rodney <hr/> Contributor address; City; State; Zip Code Grass Valley, CA 95949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Rodney <hr/> Contributor address; City; State; Zip Code Grass Valley, CA 95949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Sandra <hr/> Contributor address; City; State; Zip Code Birmingham, AL 35207	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 295/756 Rpt: 298/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilliard, Celia	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Suwanee, GA 30024		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilsendager, Frank	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Elizabeth, CO 80107		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton, Alexandria	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Belvedere Tiburon, CA 94920		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton, Alexandria	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Belvedere Tiburon, CA 94920		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Himmelstein, Sherry	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Hampden, MA 01036-9698		
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) VIP inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 296/756 Rpt: 299/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinman, brian	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Deale, MD 20751		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinman, brian	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Deale, MD 20751		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hintze, Steve	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Sugar Land, TX 77479		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hintze, Steve	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Sugar Land, TX 77479		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hintze, Steve	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Sugar Land, TX 77479		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 297/756 Rpt: 300/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hintze, Steve <hr/> 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hintze, Steve <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hintze, Steve <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hintze, Steve <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hirschboeck, Robert <hr/> Contributor address; City; State; Zip Code Ashland, OR 97520	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 298/756 Rpt: 301/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hirsh, Judith <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92128	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Michael <hr/> Contributor address; City; State; Zip Code Milwaukee, WI 53217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) Self employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Michael <hr/> Contributor address; City; State; Zip Code Milwaukee, WI 53217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) Self employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Nancy <hr/> Contributor address; City; State; Zip Code Northeast harbor, ME 04662	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) The Kimball Corporation
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Nancy <hr/> Contributor address; City; State; Zip Code Northeast harbor, ME 04662	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) The Kimball Corporation

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 299/756 Rpt: 302/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Nancy <hr/> 6 Contributor address; City; State; Zip Code Northeast Harbor, ME 04662	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retail sales		9 Employer (See Instructions) The Kimball Corp
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Wayne G. P. <hr/> Contributor address; City; State; Zip Code Kapolei, HI 96707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) DOE Dept of Education State of HI
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Renate <hr/> Contributor address; City; State; Zip Code Denton, TX 76210	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Renate <hr/> Contributor address; City; State; Zip Code Denton, TX 76210	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Renate <hr/> Contributor address; City; State; Zip Code Denton, TX 76210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 300/756 Rpt: 303/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Renate	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code Denton, TX 76210		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Renate	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Denton, TX 76210		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoke, Angela	Amount of Contribution (\$) \$44.00
Contributor address; City; State; Zip Code Mt. Juliet, TN 37122		
Principal occupation / Job title (See Instructions) Self-employed		Employer (See Instructions) Angela Hoke
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollinger, John	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Fleming Island, FL 32003		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollinger, John	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Fleming Island, FL 32003		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 301/756 Rpt: 304/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollinger, John <hr/> 6 Contributor address; City; State; Zip Code Fleming Island, FL 32003	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollinger, John <hr/> Contributor address; City; State; Zip Code Fleming Island, FL 32003	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollingsworth, Heidi <hr/> Contributor address; City; State; Zip Code Oviedo, FL 32765-8203	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollingsworth, Heidi <hr/> Contributor address; City; State; Zip Code Oviedo, FL 32765-8203	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holscher, Loretta <hr/> Contributor address; City; State; Zip Code Ocala, FL 34482	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 302/756 Rpt: 305/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holscher, Loretta	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Ocala, FL 34482		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holscher, Loretta	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Ocala, FL 34482		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holstrom, Anna	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Bozeman, MT 59718		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holt, Katherine	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Cashiers, NC 28717		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holt, Katherine	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Cashiers, NC 28717		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 303/756 Rpt: 306/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hood, William <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98136	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooper, Jonathan <hr/> Contributor address; City; State; Zip Code No City Provided, OK 73135	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Customer service		Employer (See Instructions) Southwest Airlines
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooton, Thomas <hr/> Contributor address; City; State; Zip Code Coral Gables, FL 33146	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooton, Thomas <hr/> Contributor address; City; State; Zip Code Coral Gables, FL 33146	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooton, Thomas <hr/> Contributor address; City; State; Zip Code Coral Gables, FL 33146	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 304/756 Rpt: 307/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoover, Jim	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code North Olmsted, OH 44070		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoover, Jim	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code North Olmsted, OH 44070		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoover, Jim	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code North Olmsted, OH 44070		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoover, Jim	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code North Olmsted, OH 44070		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Carol	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Woodinville, WA 98077		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 305/756 Rpt: 308/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Carol <hr/> 6 Contributor address; City; State; Zip Code Woodinville, WA 98077	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Maur <hr/> Contributor address; City; State; Zip Code Keizer, OR 97303	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Minister		Employer (See Instructions) Woodland Chapel
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Maur <hr/> Contributor address; City; State; Zip Code Keizer, OR 97303	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Minister		Employer (See Instructions) Woodland Chapel
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Maur <hr/> Contributor address; City; State; Zip Code Keizer, OR 97303	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Minister		Employer (See Instructions) Woodland Chapel
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins, Jay <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76133	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Aircraft Mechanic		Employer (See Instructions) Lockheed Martin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 306/756 Rpt: 309/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hostetler, Michael <hr/> 6 Contributor address; City; State; Zip Code Bloomington, IN 47401	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Systems Analyst		9 Employer (See Instructions) Envisage
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hough, David <hr/> Contributor address; City; State; Zip Code Winstn-Salem, NC 27104	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hough, David <hr/> Contributor address; City; State; Zip Code Winstn-Salem, NC 27104	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hough, David <hr/> Contributor address; City; State; Zip Code Winstn-Salem, NC 27104	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hourihan, Thomas <hr/> Contributor address; City; State; Zip Code Newington, NH 03801	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 307/756 Rpt: 310/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Eva <hr/> 6 Contributor address; City; State; Zip Code Westfield, MA 01085	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) West Springfield public schools
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howe, Tammy <hr/> Contributor address; City; State; Zip Code Lowell, MI 49331	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Saranac Elementary
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Galen <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75165	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudz, Tony <hr/> Contributor address; City; State; Zip Code Canoga Park, CA 91304	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huff, Cheryl <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30311	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 308/756 Rpt: 311/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Pam <hr/> 6 Contributor address; City; State; Zip Code Charlotte, NC 28216	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) None
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Robert <hr/> Contributor address; City; State; Zip Code Kansas City, MO 64108	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughey, Scott <hr/> Contributor address; City; State; Zip Code Longview, WA 98632	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughey, Scott <hr/> Contributor address; City; State; Zip Code Longview, WA 98632	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulsey, Pamela <hr/> Contributor address; City; State; Zip Code Denton, TX 76209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 309/756 Rpt: 312/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulsey, Pamela <hr/> 6 Contributor address; City; State; Zip Code Denton, TX 76209	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchens, Mary <hr/> Contributor address; City; State; Zip Code Washington, DC 20008	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchens, Mary <hr/> Contributor address; City; State; Zip Code Washington, DC 20008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchings, Hutch <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hyne, Joyce <hr/> Contributor address; City; State; Zip Code Portland, OR 97219	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 310/756 Rpt: 313/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hyser, Pamela <hr/> 6 Contributor address; City; State; Zip Code Mechanicsburg, PA 17050	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ibarra, Sylvia <hr/> Contributor address; City; State; Zip Code Vallejo, CA 94591	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) First Republic Bank
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ibarra, Sylvia <hr/> Contributor address; City; State; Zip Code Vallejo, CA 94591	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) First Republic Bank
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ignasiak, Connie <hr/> Contributor address; City; State; Zip Code Eastpointe, MI 48021	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ignasiak, Connie <hr/> Contributor address; City; State; Zip Code Eastpointe, MI 48021	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 311/756 Rpt: 314/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ignasiak, Connie <hr/> 6 Contributor address; City; State; Zip Code Eastpointe, MI 48021	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ignasiak, Connie <hr/> Contributor address; City; State; Zip Code Eastpointe, MI 48021	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ignasiak, Connie <hr/> Contributor address; City; State; Zip Code Eastpointe, MI 48021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ignatti, Louis <hr/> Contributor address; City; State; Zip Code Webster, NY 14580	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ilyas, Emily <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 312/756 Rpt: 315/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ilyas, Emily <hr/> 6 Contributor address; City; State; Zip Code Wilmington, DE 19808	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ilyas, Emily <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ilyas, Emily <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ilyas, Emily <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ilyas, Emily <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 313/756 Rpt: 316/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ilyas, Emily <hr/> 6 Contributor address; City; State; Zip Code Wilmington, DE 19808	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ilyas, Emily <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ilyas, Emily <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ilyas, Emily <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ilyas, Emily <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 314/756 Rpt: 317/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Imel, Professor Tammi Imel <hr/> 6 Contributor address; City; State; Zip Code New Castle, IN 47362	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Therapist		9 Employer (See Instructions) Self
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingala, Rose <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingala, Rose <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingala, Rose <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingala, Rose <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 315/756 Rpt: 318/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingerson, Jean <hr/> 6 Contributor address; City; State; Zip Code Oklahoma City, OK 73135	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Iskow, Lawrence <hr/> Contributor address; City; State; Zip Code Gaithersburg, MD 20878	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Iskow, Lawrence <hr/> Contributor address; City; State; Zip Code Gaithersburg, MD 20878	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Issa, Sherri <hr/> Contributor address; City; State; Zip Code Ft Lauderdale, FL 33305	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) TheraCounsel
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JEANNETTE <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94124	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 316/756 Rpt: 319/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JEANNETTE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code San Francisco, CA 94124		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JEANNETTE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Francisco, CA 94124		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JEANNETTE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code San Francisco, CA 94124		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, Lynn B	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code WINSTON-SALEM, NC 27106		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Kendall	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Nipomo, CA 93444		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 317/756 Rpt: 320/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Robert	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Upper Marlboro, MD 20792		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) none
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Robert	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Upper Marlboro, MD 20792		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) none
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Tammy	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Woodford, VA 22580		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Tammy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Woodford, VA 22580		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Tammy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Woodford, VA 22580		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 318/756 Rpt: 321/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Tammy <hr/> 6 Contributor address; City; State; Zip Code Woodford, VA 22580	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Tammy <hr/> Contributor address; City; State; Zip Code Woodford, VA 22580	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Tammy <hr/> Contributor address; City; State; Zip Code Woodford, VA 22580	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Thomasene <hr/> Contributor address; City; State; Zip Code Parkton, NC 28371	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Crew Leader		Employer (See Instructions) Chimes
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson-Guidry, Necia <hr/> Contributor address; City; State; Zip Code Aubrey, TX 75070	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 319/756 Rpt: 322/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacob, Nadette <hr/> 6 Contributor address; City; State; Zip Code Honeoye Falls, NY 14472	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacob, Nadette <hr/> Contributor address; City; State; Zip Code Honeoye Falls, NY 14472	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobson, Joshua <hr/> Contributor address; City; State; Zip Code Bradford, VT 05033	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacover, Stuart <hr/> Contributor address; City; State; Zip Code Naperville, IL 60564	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Logisnext
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jahnke, Ron <hr/> Contributor address; City; State; Zip Code East Troy, WI 53120	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 320/756 Rpt: 323/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jain, Pushpendra <hr/> 6 Contributor address; City; State; Zip Code Cookeville, TN 38501	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) MD		9 Employer (See Instructions) CEO/Cmc
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaksa, Andrea <hr/> Contributor address; City; State; Zip Code Providence Village, TX 76227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaksa, Andrea <hr/> Contributor address; City; State; Zip Code Providence Village, TX 76227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Calvin <hr/> Contributor address; City; State; Zip Code Hayward, CA 94542	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jameson, Elizabeth <hr/> Contributor address; City; State; Zip Code Calgary AB NM T3A0T5 Canada	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 321/756 Rpt: 324/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jane, Mary <hr/> 6 Contributor address; City; State; Zip Code Twin Falls, ID 83401	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason, Hilliard <hr/> Contributor address; City; State; Zip Code Boulder, CO 80303	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) not employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason, Hilliard <hr/> Contributor address; City; State; Zip Code Boulder, CO 80303	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason, Hilliard <hr/> Contributor address; City; State; Zip Code Boulder, CO 80303	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) not employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason, Hilliard <hr/> Contributor address; City; State; Zip Code Boulder, CO 80303	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 322/756 Rpt: 325/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Java, Veronica <hr/> 6 Contributor address; City; State; Zip Code Quincy, CA 95971	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffers, Gayle <hr/> Contributor address; City; State; Zip Code Omaha, NE 68130	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffers, Gayle <hr/> Contributor address; City; State; Zip Code Omaha, NE 68130	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennedy, George <hr/> Contributor address; City; State; Zip Code Washington, PA 15105	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenneman, Karen <hr/> Contributor address; City; State; Zip Code WESTMINSTER, CO 80031	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 323/756 Rpt: 326/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Mary <hr/> 6 Contributor address; City; State; Zip Code Cambridge, MA 02138	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Mary <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02138	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Bent <hr/> Contributor address; City; State; Zip Code Wellington, FL 33414	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Horse trainer		Employer (See Instructions) Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Bent <hr/> Contributor address; City; State; Zip Code Wellington, FL 33414	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Horse trainer		Employer (See Instructions) Self
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Bent <hr/> Contributor address; City; State; Zip Code Wellington, FL 33414	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Horse trainer		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 324/756 Rpt: 327/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeroslow, Raymond <hr/> 6 Contributor address; City; State; Zip Code Robbinsville, NC 28771	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez, Charles <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90046	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Laud
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez, Charles <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90046	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) LAUSD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez, Charles <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90046	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Laud
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez, Charles <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90046	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Laud

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 325/756 Rpt: 328/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez, Charles <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90046	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) LAUSD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jobe, Margaret <hr/> Contributor address; City; State; Zip Code Boulder, OH 45241	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jobe, Margaret <hr/> Contributor address; City; State; Zip Code Boulder, OH 45241	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johanos, Eva <hr/> Contributor address; City; State; Zip Code Haiku, HI 96708	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Hawaii DOE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Andrew <hr/> Contributor address; City; State; Zip Code WESTCHESTER, IL 60154	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 326/756 Rpt: 329/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Beverly <hr/> 6 Contributor address; City; State; Zip Code Moreno Valley, CA 92553	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Bill <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Blaine <hr/> Contributor address; City; State; Zip Code Flowery Branch, GA 30542	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Blaine <hr/> Contributor address; City; State; Zip Code Flowery Branch, GA 30542	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Donald <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48103	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 327/756 Rpt: 330/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kathleen 6 Contributor address; City; State; Zip Code Cadiz, KY 42211	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Family Services		9 Employer (See Instructions) Goodwin F h
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kathleen Contributor address; City; State; Zip Code Cadiz, KY 42211	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Family Services		Employer (See Instructions) Goodwin F h
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Shelly Contributor address; City; State; Zip Code Arlington, WA 98223-1213	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Barry Contributor address; City; State; Zip Code Wakefield, MA 01880	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Retired
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Charlene Contributor address; City; State; Zip Code Indianapolis, IN 46205-3685	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Charlene

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 328/756 Rpt: 331/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Charlotte	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Elmhurst, IL 60126		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Gary	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Escondido, CA 92027		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jennifer	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Henderson, NV 89011		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jennifer	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Henderson, NV 89011		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jennifer	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Henderson, NV 89011		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 329/756 Rpt: 332/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Henderson, NV 89011	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jennifer <hr/> Contributor address; City; State; Zip Code Henderson, NV 89011	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Larry <hr/> Contributor address; City; State; Zip Code Portage, WI 53901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Larry <hr/> Contributor address; City; State; Zip Code Portage, WI 53901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Larry <hr/> Contributor address; City; State; Zip Code Portage, WI 53901	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 330/756 Rpt: 333/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Larry	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Portage, WI 53901		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Larry	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Portage, WI 53901		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Larry	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Portage, WI 53901		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Larry	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Portage, WI 53901		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Lise	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code LAKEWOOD, CO 80226		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 331/756 Rpt: 334/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Lise	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code LAKEWOOD, CO 80226		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Vinetta	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Mitchellville, MD 20721		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones-Cutler, Ann	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Fort Lauderdale, FL 33317		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jorgensen, Jeff	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Houston, TX 77096		
Principal occupation / Job title (See Instructions) Medicine		Employer (See Instructions) UT MD Anderson Cancer Center
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Josimovich, Lois	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Cambridge, MA 02238		
Principal occupation / Job title (See Instructions) Nonprofit fundraising		Employer (See Instructions) MAPS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 332/756 Rpt: 335/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Josimovich, Lois <hr/> 6 Contributor address; City; State; Zip Code Cambridge, MA 02238	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Nonprofit fundraising		9 Employer (See Instructions) MAPS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyce, Tom <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55403	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyce, Tom <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55403	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyner, Francis <hr/> Contributor address; City; State; Zip Code Charlestown, MA 02129	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jubin, Jean <hr/> Contributor address; City; State; Zip Code McKinney, TX 75069	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 333/756 Rpt: 336/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judah, Colby	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Portland, OR 97220		
8 Principal occupation / Job title (See Instructions) Boutique Amplifier Manufacture		9 Employer (See Instructions) Bridge City Sound
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julius, Sandra	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Mequon, WI 53092		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julius, Sandra	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Mequon, WI 53092		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julius, Sandra	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Mequon, WI 53092		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julius, Sandra	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Mequon, WI 53092		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 334/756 Rpt: 337/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julius, Sandra <hr/> 6 Contributor address; City; State; Zip Code Mequon, WI 53092	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julius, Sandra <hr/> Contributor address; City; State; Zip Code Mequon, WI 53092	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julius, Sandra <hr/> Contributor address; City; State; Zip Code Mequon, WI 53092	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julius, Sandra <hr/> Contributor address; City; State; Zip Code Mequon, WI 53092	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julius, Sandra <hr/> Contributor address; City; State; Zip Code Mequon, WI 53092	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 335/756 Rpt: 338/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julius, Sandra	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Mequon, WI 53092	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julius, Sandra	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Mequon, WI 53092	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jur, Frank	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code Milpitas, CA 95035	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jur, Frank	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Milpitas, CA 95035	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurcoi, Cheryl	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Stillwater, MN 55082	
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) DHS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 336/756 Rpt: 339/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justesen, Kris	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Cottonwood Hts, UT 84121		
8 Principal occupation / Job title (See Instructions) Health Care		9 Employer (See Instructions) Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Elaine	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Corvallis, OR 97333		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Elaine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Corvallis, OR 97333		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Elaine	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Corvallis, OR 97333		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Elaine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Corvallis, OR 97333		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 337/756 Rpt: 340/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Elaine <hr/> 6 Contributor address; City; State; Zip Code Corvallis, OR 97333	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Elaine <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Elaine <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Elaine <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Elaine <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 338/756 Rpt: 341/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Elaine	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Corvallis, OR 97333		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Jenette	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code New York, NY 10030		
Principal occupation / Job title (See Instructions) producer		Employer (See Instructions) A Penny for Your Thoughts
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaiser, Wendy	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Bronx, NY 10471		
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions) self
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalff, Karin	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Edmonds, WA 98020-4200		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalff, Karin	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Edmonds, WA 98020-4200		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 339/756 Rpt: 342/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kamal, Murtaza <hr/> 6 Contributor address; City; State; Zip Code Colorado, CO 81001	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Bluestaq
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kana, Jane <hr/> Contributor address; City; State; Zip Code Queensbury, NY 12804	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kana, Jane <hr/> Contributor address; City; State; Zip Code Queensbury, NY 12804	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanemoto, Mike <hr/> Contributor address; City; State; Zip Code Hilo, HI 96720-6753	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) POWER Engineers
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanemoto, Mike <hr/> Contributor address; City; State; Zip Code Hilo, HI 96720-6753	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) POWER Engineers

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 340/756 Rpt: 343/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karasu, Sinan	7 Amount of Contribution (\$) \$12.00
6 Contributor address; City; State; Zip Code Seattle, WA 98115		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kariotis, Carol	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Liberty, MO 64068		
Principal occupation / Job title (See Instructions) artist/consultant		Employer (See Instructions) self employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kariotis, Carol	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Liberty, MO 64068		
Principal occupation / Job title (See Instructions) artist/consultant		Employer (See Instructions) self employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karny, Lori	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Los Angeles, CA 90048		
Principal occupation / Job title (See Instructions) Clinical Social Worker		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karny, Lori	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Los Angeles, CA 90048		
Principal occupation / Job title (See Instructions) Clinical Social Worker		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 341/756 Rpt: 344/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karp, Marsha <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21231	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Johns Hopkins University
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karr, George <hr/> Contributor address; City; State; Zip Code Lago Vista, TX 78645	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) General Electric
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kavanaugh, Michael <hr/> Contributor address; City; State; Zip Code Pryor, OK 74361	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Programming		Employer (See Instructions) Fidelity information services
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kavanaugh, Michael <hr/> Contributor address; City; State; Zip Code Pryor, OK 74361	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Programming		Employer (See Instructions) Fidelity information services
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kavanaugh, Michael <hr/> Contributor address; City; State; Zip Code Pryor, OK 74361	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Programming		Employer (See Instructions) Fidelity information services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 342/756 Rpt: 345/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaveny, Jill <hr/> 6 Contributor address; City; State; Zip Code Loveland, CO 80538	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kay, Chris <hr/> Contributor address; City; State; Zip Code SanJose, CA 95118	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) USD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kay, Chris <hr/> Contributor address; City; State; Zip Code SanJose, CA 95118	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) USD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kean, Barbara <hr/> Contributor address; City; State; Zip Code Milton, MA 02186	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keim, Lois <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87120	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 343/756 Rpt: 346/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Kelly <hr/> 6 Contributor address; City; State; Zip Code Lakewood, CO 80235	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Shara <hr/> Contributor address; City; State; Zip Code Buellton, CA 93427	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Adria <hr/> Contributor address; City; State; Zip Code Port Orange, FL 32127	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Adria <hr/> Contributor address; City; State; Zip Code Port Orange, FL 32127	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Adria <hr/> Contributor address; City; State; Zip Code Port Orange, FL 32127	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 344/756 Rpt: 347/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Christie <hr/> 6 Contributor address; City; State; Zip Code Carmel Valley, CA 93924	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, John <hr/> Contributor address; City; State; Zip Code Avon, CT 06001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Kevin <hr/> Contributor address; City; State; Zip Code Cumberland, MD 21502	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Kevin <hr/> Contributor address; City; State; Zip Code Cumberland, MD 21502	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Michael <hr/> Contributor address; City; State; Zip Code Orinda, CA 94563	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 345/756 Rpt: 348/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Michael <hr/> 6 Contributor address; City; State; Zip Code Orinda, CA 94563	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Michael <hr/> Contributor address; City; State; Zip Code Orinda, CA 94563	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Oscar <hr/> Contributor address; City; State; Zip Code Mason City, IA 50401	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Rebecca <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87120	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Coordinator		Employer (See Instructions) PHS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kemp, Jane <hr/> Contributor address; City; State; Zip Code Fallbrook, CA 92028	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 346/756 Rpt: 349/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall, Sherry <hr/> 6 Contributor address; City; State; Zip Code Oklahoma City, OK 73142	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Colleen <hr/> Contributor address; City; State; Zip Code Brooklyn, CT 06234	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) marketing assistant		Employer (See Instructions) Brookwood Companies INC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Colleen <hr/> Contributor address; City; State; Zip Code Brooklyn, CT 06234	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) marketing assistant		Employer (See Instructions) Brookwood Companies INC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Linda <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424-1417	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) College instructor		Employer (See Instructions) Wayland Baptist University
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Linda <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424-1417	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) College instructor		Employer (See Instructions) Wayland Baptist University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 347/756 Rpt: 350/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Linda	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Lubbock, TX 79424-1417		
8 Principal occupation / Job title (See Instructions) College instructor		9 Employer (See Instructions) Wayland Baptist University
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Linda	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Lubbock, TX 79424-1417		
Principal occupation / Job title (See Instructions) College instructor		Employer (See Instructions) Wayland Baptist University
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Linda	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Lubbock, TX 79424-1417		
Principal occupation / Job title (See Instructions) College instructor		Employer (See Instructions) Wayland Baptist University
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Linda	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Lubbock, TX 79424-1417		
Principal occupation / Job title (See Instructions) College instructor		Employer (See Instructions) Wayland Baptist University
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Linda	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Lubbock, TX 79424-1417		
Principal occupation / Job title (See Instructions) College instructor		Employer (See Instructions) Wayland Baptist University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 348/756 Rpt: 351/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Linda <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79424-1417	7 Amount of Contribution (\$) \$11.00
8 Principal occupation / Job title (See Instructions) College instructor		9 Employer (See Instructions) Wayland Baptist University
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennerly, Fred <hr/> Contributor address; City; State; Zip Code Rockford, IL 61107	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenney, Martha <hr/> Contributor address; City; State; Zip Code Louisville, KY 40206	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) LCSW		Employer (See Instructions) Self
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenny, Janis <hr/> Contributor address; City; State; Zip Code Warren, MI 48093	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenny, Janis <hr/> Contributor address; City; State; Zip Code Warren, MI 48093	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 349/756 Rpt: 352/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kent, Shelley 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90034	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Movie TV Marketing		9 Employer (See Instructions) LA6721
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kent, Shelley Contributor address; City; State; Zip Code LOS ANGELES, CA 90034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Movie TV Marketing		Employer (See Instructions) LA6721
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerestury, Debora Contributor address; City; State; Zip Code Grand Rapids, MI 49544	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Security Guard		Employer (See Instructions) DK Security
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerlick, David Contributor address; City; State; Zip Code Seattle, WA 98126	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keyes, Norman Contributor address; City; State; Zip Code Baytown, TX 77523	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 350/756 Rpt: 353/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keyes, Norman <hr/> 6 Contributor address; City; State; Zip Code Baytown, TX 77523	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilgore, Margaret <hr/> Contributor address; City; State; Zip Code Branford, CT 06405	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilwein, Dianne <hr/> Contributor address; City; State; Zip Code Escondido, CA 92029	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilwein, Dianne <hr/> Contributor address; City; State; Zip Code Escondido, CA 92029	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinach, Barbara <hr/> Contributor address; City; State; Zip Code Gilbert, AZ 85296	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Arizona state university

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 351/756 Rpt: 354/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kincaid, Marguerite <hr/> 6 Contributor address; City; State; Zip Code Lake Forest, CA 92630	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kincaid, Marguerite <hr/> Contributor address; City; State; Zip Code Lake Forest, CA 92630	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kincaid, Marguerite <hr/> Contributor address; City; State; Zip Code Lake Forest, CA 92630	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kincaid, Marguerite <hr/> Contributor address; City; State; Zip Code Lake Forest, CA 92630	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kincaid, Marguerite <hr/> Contributor address; City; State; Zip Code Lake Forest, CA 92630	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 352/756 Rpt: 355/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kincaid, Marguerite <hr/> 6 Contributor address; City; State; Zip Code Lake Forest, CA 92630	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Judy <hr/> Contributor address; City; State; Zip Code Highlands Ranch, CO 80130	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Judy <hr/> Contributor address; City; State; Zip Code Highlands Ranch, CO 80130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Tom <hr/> Contributor address; City; State; Zip Code Virginia, MN 55792	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Tom <hr/> Contributor address; City; State; Zip Code Virginia, MN 55792	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 353/756 Rpt: 356/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingman, Dan <hr/> 6 Contributor address; City; State; Zip Code Topeka, KS 66614	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Real Estate Broker		9 Employer (See Instructions) Cherrywood Realty LLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirby, Joanne <hr/> Contributor address; City; State; Zip Code Waterford, MI 48329	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirkpatrick, Kelley <hr/> Contributor address; City; State; Zip Code Tempe, AZ 85282-4666	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirton, Barbara <hr/> Contributor address; City; State; Zip Code Miami, FL 33183	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirton, Barbara <hr/> Contributor address; City; State; Zip Code Miami, FL 33183	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 354/756 Rpt: 357/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirton, Barbara <hr/> 6 Contributor address; City; State; Zip Code Miami, FL 33183	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirton, Barbara <hr/> Contributor address; City; State; Zip Code Miami, FL 33183	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirton, Barbara <hr/> Contributor address; City; State; Zip Code Miami, FL 33183	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kishbaugh, Donald <hr/> Contributor address; City; State; Zip Code Easton, PA 18045	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kite, Dan <hr/> Contributor address; City; State; Zip Code Jacksonville, FL 32244	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Dan kite pinstriping

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 355/756 Rpt: 358/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kite, Dan <hr/> 6 Contributor address; City; State; Zip Code Jacksonville, FL 32244	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Dan kite pinstripping
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Cari <hr/> Contributor address; City; State; Zip Code Catonsville, MD 21228	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Cari <hr/> Contributor address; City; State; Zip Code Catonsville, MD 21228	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Cari <hr/> Contributor address; City; State; Zip Code Catonsville, MD 21228	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Larry <hr/> Contributor address; City; State; Zip Code Somerset, NJ 08873	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 356/756 Rpt: 359/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klestzick, Barbara 6 Contributor address; City; State; Zip Code Arlington, VA 22202	7 Amount of Contribution (\$) \$36.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klitzman, Susan Contributor address; City; State; Zip Code BROOKLYN, NY 11238	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Higher Ed Admin		Employer (See Instructions) CUNY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klott, Karen Contributor address; City; State; Zip Code Kalamazoo, MI 49009	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knapp, Brian Contributor address; City; State; Zip Code Shawano, WI 54166	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knapp, Marjorie Contributor address; City; State; Zip Code Escondido, CA 92029	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 357/756 Rpt: 360/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knapp, Marjorie <hr/> 6 Contributor address; City; State; Zip Code Escondido, CA 92029	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knapp, Marjorie <hr/> Contributor address; City; State; Zip Code Escondido, CA 92029	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knapp, Marjorie <hr/> Contributor address; City; State; Zip Code Escondido, CA 92029	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knapp, Marjorie <hr/> Contributor address; City; State; Zip Code Escondido, CA 92029	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knapp, Marjorie <hr/> Contributor address; City; State; Zip Code Escondido, CA 92029	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 358/756 Rpt: 361/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, David <hr/> 6 Contributor address; City; State; Zip Code Bothell, WA 98011	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knopf, Peter <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94306	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knopf, Peter <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94306	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knowles, Nancy <hr/> Contributor address; City; State; Zip Code Fort Walton Beach, FL 32547	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knowlton, Sandra <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84109	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 359/756 Rpt: 362/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kochkodan, Mark <hr/> 6 Contributor address; City; State; Zip Code Coral Springs, FL 33065-4319	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koechlin, Emily <hr/> Contributor address; City; State; Zip Code Takoma Park, MD 20912-6419	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kortum, Richard <hr/> Contributor address; City; State; Zip Code Aptos, CA 95003	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kortum, Richard <hr/> Contributor address; City; State; Zip Code Aptos, CA 95003	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korus, Deb <hr/> Contributor address; City; State; Zip Code La Farge, WI 54639	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 360/756 Rpt: 363/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kotz, Jack <hr/> 6 Contributor address; City; State; Zip Code Charleston, SC 29412	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kral, Brian <hr/> Contributor address; City; State; Zip Code Green Bay, WI 54303	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) security officer		Employer (See Instructions) First Church of Christ Scientists
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kral, Brian <hr/> Contributor address; City; State; Zip Code Green Bay, WI 54303	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) security officer		Employer (See Instructions) First Church of Christ Scientists
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kramer, Michele <hr/> Contributor address; City; State; Zip Code Denison, TX 75020	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Occupational Therapist		Employer (See Instructions) Retired
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kranz, Mary Ann <hr/> Contributor address; City; State; Zip Code Nekoosa, WI 54457	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 361/756 Rpt: 364/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kratzmann, Monika <hr/> 6 Contributor address; City; State; Zip Code Boston, MA 02110	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) Senior Collector		9 Employer (See Instructions) InterSystems Corporation
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kratzmann, Monika <hr/> Contributor address; City; State; Zip Code Boston, MA 02110	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Senior Collector		Employer (See Instructions) InterSystems Corporation
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kratzmann, Monika <hr/> Contributor address; City; State; Zip Code Boston, MA 02110	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Senior Collector		Employer (See Instructions) InterSystems Corporation
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kratzmann, Monika <hr/> Contributor address; City; State; Zip Code Boston, MA 02110	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Senior Collector		Employer (See Instructions) InterSystems Corporation
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kratzmann, Monika <hr/> Contributor address; City; State; Zip Code Boston, MA 02110	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Senior Collector		Employer (See Instructions) InterSystems Corporation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 362/756 Rpt: 365/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kroeger, Randy <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krum, Anne <hr/> Contributor address; City; State; Zip Code Broomfield, CO 80023	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krum, Anne <hr/> Contributor address; City; State; Zip Code Broomfield, CO 80023	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krumlauf, Michael <hr/> Contributor address; City; State; Zip Code Rockbridge, OH 43149	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuan, Flora <hr/> Contributor address; City; State; Zip Code Chappaqua, NY 10514	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Manhattanville College

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 363/756 Rpt: 366/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubbs, Macelene <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98125	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubbs, Macelene <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubbs, Macelene <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuehl, Joan <hr/> Contributor address; City; State; Zip Code Ponder, TX 76259	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CIO		Employer (See Instructions) Elevate Credit Inc.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kulisek, James <hr/> Contributor address; City; State; Zip Code Newburgh, NY 12550	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 364/756 Rpt: 367/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kurtz, Marjorie	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Madison, WI 53718	
8 Principal occupation / Job title (See Instructions) court reporter		9 Employer (See Instructions) state of wis.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuwana, Susan E	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Alexandria, VA 22315	
Principal occupation / Job title (See Instructions) Engineering		Employer (See Instructions) mitre
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuwana, Susan E	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Alexandria, VA 22315	
Principal occupation / Job title (See Instructions) Engineering		Employer (See Instructions) mitre
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIMANIS, Margarete H.	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code Portland, OR 97209	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIMANIS, Margarete H.	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code Portland, OR 97209	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 365/756 Rpt: 368/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTON, RICHARD <hr/> 6 Contributor address; City; State; Zip Code WALNUT CREEK, CA 94598	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaFLEUR, JENNA <hr/> Contributor address; City; State; Zip Code Seattle, WA 98107	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaFrance, Roberta <hr/> Contributor address; City; State; Zip Code San Leandro, CA 94579	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Wine Sales Rep.		Employer (See Instructions) Wine Warehouse
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaFrance, Roberta <hr/> Contributor address; City; State; Zip Code San Leandro, CA 94579	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Wine Sales Rep.		Employer (See Instructions) Wine Warehouse
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaFrance, Roberta <hr/> Contributor address; City; State; Zip Code San Leandro, CA 94579	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Wine Sales Rep.		Employer (See Instructions) Wine Warehouse

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 366/756 Rpt: 369/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lachman, Terri <hr/> 6 Contributor address; City; State; Zip Code Saint Petersburg, FL 33704	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lachman, Terri <hr/> Contributor address; City; State; Zip Code Saint Petersburg, FL 33704	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lachman, Terri <hr/> Contributor address; City; State; Zip Code Saint Petersburg, FL 33704	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lachman, Terri <hr/> Contributor address; City; State; Zip Code Saint Petersburg, FL 33704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackmann, Laurence <hr/> Contributor address; City; State; Zip Code Placentia, CA 92870	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 367/756 Rpt: 370/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ladwig, Marjory	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Plano, TX 75074		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ladwig, Marjory	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Plano, TX 75074		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lakehomer, James	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97035-2565		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lakehomer, James	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97035-2565		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamson, Karen	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code The Dalles, OR 97058		
Principal occupation / Job title (See Instructions) Rental manager		Employer (See Instructions) Rowena Crest nanor

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 368/756 Rpt: 371/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamson, Karen	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code The Dalles, OR 97058	
8 Principal occupation / Job title (See Instructions) Rental manager		9 Employer (See Instructions) Rowena Crest nanor
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamson, Karen	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code The Dalles, OR 97058	
Principal occupation / Job title (See Instructions) Rental manager		Employer (See Instructions) Rowena Crest nanor
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancot, Samuel	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Silver Spring, MD 20910	
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Geico
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Land, Sarah	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Lagrange Park, IL 60526	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Nordstrom
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landaker, Betsy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Wimberley, TX 78676	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 369/756 Rpt: 372/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landeros, Vincent <hr/> 6 Contributor address; City; State; Zip Code Gilroy, CA 95020	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landis, John <hr/> Contributor address; City; State; Zip Code Beverly Hills, CA 90210	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Levitsky Productions Inc.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landis, John <hr/> Contributor address; City; State; Zip Code Beverly Hills, CA 90210	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Levitsky Productions Inc.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Bob <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30312	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Auto tech		Employer (See Instructions) Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Carol <hr/> Contributor address; City; State; Zip Code Memphis, TN 38135	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 370/756 Rpt: 373/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Constance <hr/> 6 Contributor address; City; State; Zip Code San Jose, CA 95118	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Constance <hr/> Contributor address; City; State; Zip Code San Jose, CA 95118	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Constance <hr/> Contributor address; City; State; Zip Code San Jose, CA 95118	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Constance <hr/> Contributor address; City; State; Zip Code San Jose, CA 95118	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Constance <hr/> Contributor address; City; State; Zip Code San Jose, CA 95118	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 371/756 Rpt: 374/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Constance <hr/> 6 Contributor address; City; State; Zip Code San Jose, CA 95118	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Constance <hr/> Contributor address; City; State; Zip Code San Jose, CA 95118	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langford, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) psychologist		Employer (See Instructions) self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langhorne, Webster L <hr/> Contributor address; City; State; Zip Code College Park, GA 30349	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langhorne, Webster L <hr/> Contributor address; City; State; Zip Code College Park, GA 30349	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 372/756 Rpt: 375/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langhorne, Webster L <hr/> 6 Contributor address; City; State; Zip Code College Park, GA 30349	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langrock, Amy <hr/> Contributor address; City; State; Zip Code East Windsor, NJ 08520	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langrock, Amy <hr/> Contributor address; City; State; Zip Code East Windsor, NJ 08520	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langrock, Amy <hr/> Contributor address; City; State; Zip Code East Windsor, NJ 08520	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langrock, Amy <hr/> Contributor address; City; State; Zip Code East Windsor, NJ 08520	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 373/756 Rpt: 376/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langrock, Amy <hr/> 6 Contributor address; City; State; Zip Code East Windsor, NJ 08520	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lartey, Emmanuel <hr/> Contributor address; City; State; Zip Code Stone Mountain, GA 30087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Emory University
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lartey, Emmanuel <hr/> Contributor address; City; State; Zip Code Stone Mountain, GA 30087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Emory University
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law, Pam <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95401	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Program manager		Employer (See Instructions) Community Support Network
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Mike <hr/> Contributor address; City; State; Zip Code Plantation, FL 33317	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 374/756 Rpt: 377/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Gloria	7 Amount of Contribution (\$) \$24.00
	6 Contributor address; City; State; Zip Code San Luis Obispo, CA 93405	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Layne, Linda	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Crete, IL 60417	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lazzarini, Judith	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Santa Maria, CA 93454	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Le Blanc, Donna	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Huntington Beach, CA 92648	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leach, Leslie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Redlands, CA 92374	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 375/756 Rpt: 378/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leach, Leslie <hr/> 6 Contributor address; City; State; Zip Code Redlands, CA 92374	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leake, Carol <hr/> Contributor address; City; State; Zip Code New Orleans, LA 70118	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leake, Carol <hr/> Contributor address; City; State; Zip Code New Orleans, LA 70118	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leary, Kathleen <hr/> Contributor address; City; State; Zip Code Madison, WI 53705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leary, Kathleen <hr/> Contributor address; City; State; Zip Code Madison, WI 53705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 376/756 Rpt: 379/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leaver, Sylvia G <hr/> 6 Contributor address; City; State; Zip Code Chapel Hill, NC 27517	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leaver, Sylvia G <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leaver, Sylvia G <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leavitt, Stephanie <hr/> Contributor address; City; State; Zip Code Belmont, CA 94002	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leavitt, Stephanie <hr/> Contributor address; City; State; Zip Code Belmont, CA 94002	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 377/756 Rpt: 380/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lebed, Holly <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90024	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Bernice <hr/> Contributor address; City; State; Zip Code Sewickley, PA 15143	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Self Employed Consultant		Employer (See Instructions) Evergreen Mgt
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Julie <hr/> Contributor address; City; State; Zip Code Denver, CO 80218	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehman, Julia <hr/> Contributor address; City; State; Zip Code DENTON, TX 76205-6965	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehman, Phyllis <hr/> Contributor address; City; State; Zip Code Miami, FL 33181	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 378/756 Rpt: 381/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehman, Phyllis <hr/> 6 Contributor address; City; State; Zip Code Miami, FL 33181	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehrer, Sander <hr/> Contributor address; City; State; Zip Code Oceanside, NY 11572	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehrer, Sander <hr/> Contributor address; City; State; Zip Code Oceanside, NY 11572	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leibert, Alessia <hr/> Contributor address; City; State; Zip Code Edina, MN 55410	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) analyst		Employer (See Instructions) State of MN
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leibowitz, David <hr/> Contributor address; City; State; Zip Code Ballston Lake, NY 12019	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 379/756 Rpt: 382/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leinberger, Susan <hr/> 6 Contributor address; City; State; Zip Code Irvine, CA 92606	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leininger, Joel <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27516	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leman, David <hr/> Contributor address; City; State; Zip Code Ellensburg, WA 98926	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leman, David <hr/> Contributor address; City; State; Zip Code Ellensburg, WA 98926	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lennon, Cheryl <hr/> Contributor address; City; State; Zip Code Bristol, WI 53104-9303	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 380/756 Rpt: 383/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lennon, Cheryl	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Bristol, WI 53104-9303		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leslie, Virginia	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Cumming, GA 30041		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leslie, Virginia	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Cumming, GA 30041		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leslie, Virginia	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Cumming, GA 30041		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leslie, Virginia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Cumming, GA 30041		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 381/756 Rpt: 384/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lester, Russell <hr/> 6 Contributor address; City; State; Zip Code Linton, IN 47441	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levin, Elisa <hr/> Contributor address; City; State; Zip Code Hailey, ID 83333	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levine, Ben <hr/> Contributor address; City; State; Zip Code Calabasas, CA 91302-1597	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Trustee		Employer (See Instructions) Dst
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leviton, Ann <hr/> Contributor address; City; State; Zip Code Fort Collins, CO 80525	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leviton, Ann <hr/> Contributor address; City; State; Zip Code Fort Collins, CO 80525	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 382/756 Rpt: 385/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leviton, Ann <hr/> 6 Contributor address; City; State; Zip Code Fort Collins, CO 80525	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leviton, Ann <hr/> Contributor address; City; State; Zip Code Fort Collins, CO 80525	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leviton, Ann <hr/> Contributor address; City; State; Zip Code Fort Collins, CO 80525	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leviton, Ann <hr/> Contributor address; City; State; Zip Code Fort Collins, CO 80525	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Eugene H <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Rice University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 383/756 Rpt: 386/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Eugene H <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Rice University
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Eugene H <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Rice University
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Eric <hr/> Contributor address; City; State; Zip Code Burbank, CA 91505	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Operations Management		Employer (See Instructions) NBC Universal
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Eric <hr/> Contributor address; City; State; Zip Code Burbank, CA 91505	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Operations Management		Employer (See Instructions) NBC Universal
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Rhonda <hr/> Contributor address; City; State; Zip Code Indianapolis, IN 46254	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 384/756 Rpt: 387/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lickliders, Janann <hr/> 6 Contributor address; City; State; Zip Code Cambridge, MA 02139	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lickliders, Janann <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02139	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lightbody, Donna <hr/> Contributor address; City; State; Zip Code Lincoln, NE 68502	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lim, Russell <hr/> Contributor address; City; State; Zip Code Chula Vista, CA 91913	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Psychiatrist		Employer (See Instructions) Comprehensive Psychiatric Services
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Line, Barbara <hr/> Contributor address; City; State; Zip Code Mt Clemens, MI 48043	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 385/756 Rpt: 388/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ling, Fuyun <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92127-2807	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipp, Barbara E <hr/> Contributor address; City; State; Zip Code Fallston, MD 22047	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipp, Barbara E <hr/> Contributor address; City; State; Zip Code Fallston, MD 21047	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipp, Barbara E <hr/> Contributor address; City; State; Zip Code Fallston, MD 21047	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Littman, Robert <hr/> Contributor address; City; State; Zip Code Reisterstown, MD 21136	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 386/756 Rpt: 389/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litton, Elaine	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Cardiff By The Sea, CA 92007		
8 Principal occupation / Job title (See Instructions) psychotherapist		9 Employer (See Instructions) self
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Llamas III, Franco	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Madison, WI 53717		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) none
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Dr. Lillis	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Chandler, AZ 85224		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Dr. Lillis	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chandler, AZ 85224		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Dr. Lillis	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chandler, AZ 85224		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 387/756 Rpt: 390/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Dr. Lillis	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Chandler, AZ 85224		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Dr. Lillis	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Chandler, AZ 85224		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Dr. Lillis	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Chandler, AZ 85224		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Dr. Lillis	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Chandler, AZ 85224		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lo Giudice, Richard	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Millbrae, CA 94030		
Principal occupation / Job title (See Instructions) Window Washer/Pressure Washer		Employer (See Instructions) Owner

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 388/756 Rpt: 391/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LoPresti, Robert	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Rumson, NJ 07760		
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Locks, David	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Chicago, IL 60618		
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) self
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loewenstein, Birgit Rose	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code SEDONA, AZ 86336		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loewenstein, Birgit Rose	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SEDONA, AZ 86336		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loewenstein, Birgit Rose	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SEDONA, AZ 86336		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 389/756 Rpt: 392/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loewenstein, Birgit Rose <hr/> 6 Contributor address; City; State; Zip Code SEDONA, AZ 86336	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loewenstein, Birgit Rose <hr/> Contributor address; City; State; Zip Code SEDONA, AZ 86336	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logan, Bob <hr/> Contributor address; City; State; Zip Code Carmel, NY 10512	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logan, Steven <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27516	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Steven A Logan
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logan, Thad <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 390/756 Rpt: 393/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lohnes, Peter <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98116	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lomax, Virginia <hr/> Contributor address; City; State; Zip Code Decatur, GA 30034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Maxim Healthcare
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Elizabeth <hr/> Contributor address; City; State; Zip Code Durango, CO 81301-8940	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Stewart <hr/> Contributor address; City; State; Zip Code Santa Fe, NM 87508	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longden, Gregory <hr/> Contributor address; City; State; Zip Code Cortlandt Manor, NY 10567	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 391/756 Rpt: 394/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longoria, Deanna <hr/> 6 Contributor address; City; State; Zip Code McAllen, TX 78501	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Art <hr/> Contributor address; City; State; Zip Code Hollywood, FL 33020	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Oved <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75050	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Roberto <hr/> Contributor address; City; State; Zip Code Sierra Vista, AZ 85635	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorene Gutman, Mark H. <hr/> Contributor address; City; State; Zip Code commerce twp, MI 48382	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 392/756 Rpt: 395/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorene Gutman, Mark H.	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code commerce twp, MI 48382	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowy, Ruth	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Palo Alto, CA 94306	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loy, Gareth	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Corte Madera, CA 94915	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lubar, David	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Aurora, CO 80016-1908	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Aerospace Corp
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lubar, David	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Aurora, CO 80016-1908	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Aerospace Corp

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 393/756 Rpt: 396/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lubar, David <hr/> 6 Contributor address; City; State; Zip Code Aurora, CO 80016-1908	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Aerospace Corp
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucht, Elizabeth <hr/> Contributor address; City; State; Zip Code Madison, WI 53714	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) physician assistant		Employer (See Instructions) Group Health Cooperative
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luecke, Chris <hr/> Contributor address; City; State; Zip Code SOUTH LAKE TAHOE, CA 96150-6101	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luecke, Chris <hr/> Contributor address; City; State; Zip Code SOUTH LAKE TAHOE, CA 96150-6101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luecke, Chris <hr/> Contributor address; City; State; Zip Code SOUTH LAKE TAHOE, CA 96150-6101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 394/756 Rpt: 397/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luhrs, Kathleen	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Sausalito, CA 94965-2043		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luhrs, Kathleen	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Sausalito, CA 94965-2043		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lukas, Coco	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Cincinnati, OH 45244		
Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) HealthNet Inc.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna, Vita	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Tucson, AZ 85713		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna, Vita	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Tucson, AZ 85713		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 395/756 Rpt: 398/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna, Vita	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Tucson, AZ 85713		
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) Self
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna, Vita	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Tucson, AZ 85713		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna, Vita	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Tucson, AZ 85713		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna, Vita	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Tucson, AZ 85713		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna, Vita	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Tucson, AZ 85713		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 396/756 Rpt: 399/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lund, David <hr/> 6 Contributor address; City; State; Zip Code Salisbury, NC 28146	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lundy, Michael <hr/> Contributor address; City; State; Zip Code Farmington Hills, MI 48336	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunestad, Sandra <hr/> Contributor address; City; State; Zip Code Hot Springs National Park, AR 71913	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunestad, Sandra <hr/> Contributor address; City; State; Zip Code Hot Springs National Park, AR 71913	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunestad, Sandra <hr/> Contributor address; City; State; Zip Code Hot Springs National Park, AR 71913	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 397/756 Rpt: 400/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunestad, Sandra <hr/> 6 Contributor address; City; State; Zip Code Hot Springs National Park, AR 71913	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyons, Veronica <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85250	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M. Smith, Joyce <hr/> Contributor address; City; State; Zip Code Greenville, SC 29615	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M. Smith, Joyce <hr/> Contributor address; City; State; Zip Code Greenville, SC 29615	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIRTHES, Silvia <hr/> Contributor address; City; State; Zip Code Bushkill, PA 18324	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 398/756 Rpt: 401/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOCK, DAVID <hr/> 6 Contributor address; City; State; Zip Code Sandy, UT 84092	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Boulder Mt Lodge
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTON, B COLE <hr/> Contributor address; City; State; Zip Code South Wellfleet, MA 02663	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTON, B COLE <hr/> Contributor address; City; State; Zip Code South Wellfleet, MA 02663	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacTaggart, Melissa <hr/> Contributor address; City; State; Zip Code Castle Rock, CO 80109	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacTaggart, Melissa <hr/> Contributor address; City; State; Zip Code Castle Rock, CO 80109	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 399/756 Rpt: 402/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macleod, Fiona <hr/> 6 Contributor address; City; State; Zip Code Opelika, AL 36801	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Freelance Theatre Director		9 Employer (See Instructions) self
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macleod, Fiona <hr/> Contributor address; City; State; Zip Code Opelika, AL 36801	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magas, Joy <hr/> Contributor address; City; State; Zip Code Temecula, CA 92591	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Tim <hr/> Contributor address; City; State; Zip Code DeLand, FL 32720	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahler, Ronnie <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94109	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ballet Instructor		Employer (See Instructions) Roni Mahler

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 400/756 Rpt: 403/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahler, Ronnie	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code San Francisco, CA 94109		
8 Principal occupation / Job title (See Instructions) Ballet Instructor		9 Employer (See Instructions) Roni Mahler
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahoutchian, Paul	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Raleigh, NC 27606		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahoutchian, Paul	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Raleigh, NC 27606		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Makidon, Patrick	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Clio, MI 48420		
Principal occupation / Job title (See Instructions) Retired & Self empoid		Employer (See Instructions) Unique Driving Testers LLC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Makinson, Denise	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Coeur d'Alene, ID 83815		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 401/756 Rpt: 404/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Makinson, Denise <hr/> 6 Contributor address; City; State; Zip Code Coeur d'Alene, ID 83815	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Makinson, Denise <hr/> Contributor address; City; State; Zip Code Coeur d'Alene, ID 83815	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Makinson, Denise <hr/> Contributor address; City; State; Zip Code Coeur d'Alene, ID 83815	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Makshanoff, Andrea S <hr/> Contributor address; City; State; Zip Code Topanga, CA 90290	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malia Lopergolo, Monica <hr/> Contributor address; City; State; Zip Code Waldorf, MD 20603	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 402/756 Rpt: 405/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manahan, Wayne L.	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Concord, NC 28027	
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manaugh, Mike	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Venice, CA 90291	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manchester, Kathleen	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Kennett Square, PA 19348	
Principal occupation / Job title (See Instructions) Admin Professional		Employer (See Instructions) Self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manion, Alice	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Belton, MO 64012	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manion, Alice	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code Belton, MO 64012	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 403/756 Rpt: 406/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Lorene <hr/> 6 Contributor address; City; State; Zip Code Laguna Hills, CA 92653	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Lorene <hr/> Contributor address; City; State; Zip Code Laguna Hills, CA 92653	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Lorene <hr/> Contributor address; City; State; Zip Code Laguna Hills, CA 92653	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Lorene <hr/> Contributor address; City; State; Zip Code Laguna Hills, CA 92653	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, William R <hr/> Contributor address; City; State; Zip Code New Orleans, LA 70131	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Manning Architects

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 404/756 Rpt: 407/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mantyla, Susan <hr/> 6 Contributor address; City; State; Zip Code Santa Barbara, CA 93101	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mantyla, Susan <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93101	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marco, Jennifer <hr/> Contributor address; City; State; Zip Code Mcalester, OK 74501-8775	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marco, Jennifer <hr/> Contributor address; City; State; Zip Code Mcalester, OK 74501-8775	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marco, Jennifer <hr/> Contributor address; City; State; Zip Code Mcalester, OK 74501-8775	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 405/756 Rpt: 408/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marco, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Mcalester, OK 74501-8775	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marco, Jennifer <hr/> Contributor address; City; State; Zip Code Mcalester, OK 74501-8775	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marco, Jennifer <hr/> Contributor address; City; State; Zip Code Mcalester, OK 74501-8775	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marco, Jennifer <hr/> Contributor address; City; State; Zip Code Mcalester, OK 74501-8775	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcoe, Joanne <hr/> Contributor address; City; State; Zip Code Tacoma, WA 98407	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Massage Therapist		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 406/756 Rpt: 409/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mardis, Cordell	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Birmingham, AL 35211		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marengo, Mary	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Worcester, MA 01607		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Newton Wellesley hospital
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margin, Bernadette	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Issaquah, WA 98027		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margin, Bernadette	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Issaquah, WA 98027		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, William	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code College Station, TX 77840		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 407/756 Rpt: 410/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marra, Mary Lynn	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Stockton, NJ 08559		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marra, Mary Lynn	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Stockton, NJ 08559		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marsh, James	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Westford, MA 01886		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Jessie	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Dowagiac, MI 49047		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, George	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Morristown, NJ 07960		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 408/756 Rpt: 411/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Gilbert <hr/> 6 Contributor address; City; State; Zip Code Gainesville, FL 32605	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Gilbert <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32605	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Gilbert <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32605	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Gilbert <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32605	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Gilbert <hr/> Contributor address; City; State; Zip Code Gainesville, FL 32605	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 409/756 Rpt: 412/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Gilbert	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Gainesville, FL 32605		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Gilbert	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Gainesville, FL 32605		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Mary Archer	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code garrison, NY 10524		
Principal occupation / Job title (See Instructions) therapist/Clinical social worker		Employer (See Instructions) self
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Mary Archer	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code garrison, NY 10524		
Principal occupation / Job title (See Instructions) therapist/Clinical social worker		Employer (See Instructions) self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Mary Archer	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code garrison, NY 10524		
Principal occupation / Job title (See Instructions) therapist/Clinical social worker		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 410/756 Rpt: 413/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Suzanne 6 Contributor address; City; State; Zip Code Cranbury, NJ 08512	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) SGM & Associates Inc
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Kathryn C Contributor address; City; State; Zip Code Brooklyn, NY 11238	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Jewelry Designer		Employer (See Instructions) Sequin
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Olga Yvonne Contributor address; City; State; Zip Code Independence, KS 67301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marzolf, KATHRYN Contributor address; City; State; Zip Code San Jose, CA 95118	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marzuki, Marcy Contributor address; City; State; Zip Code Chicago, IL 60647	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Aleut federal

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 411/756 Rpt: 414/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masck, Mary Beth <hr/> 6 Contributor address; City; State; Zip Code Ocala, FL 34481-9330	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masck, Mary Beth <hr/> Contributor address; City; State; Zip Code Ocala, FL 34481-9330	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masem, Mathias <hr/> Contributor address; City; State; Zip Code Oakland, CA 94612	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masker, Christine <hr/> Contributor address; City; State; Zip Code Greenacres, FL 33463	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Designmake&sell jewelry		Employer (See Instructions) Self employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masker, Christine <hr/> Contributor address; City; State; Zip Code Greenacres, FL 33463	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Designmake&sell jewelry		Employer (See Instructions) Self employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 412/756 Rpt: 415/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mastrangelo, Dolores <hr/> 6 Contributor address; City; State; Zip Code North Fort Myers, FL 33903	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mastromatteo, Charlene <hr/> Contributor address; City; State; Zip Code Brewster, MA 02631	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathon, Judy <hr/> Contributor address; City; State; Zip Code Roswell, GA 30076	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathon, Judy <hr/> Contributor address; City; State; Zip Code Roswell, GA 30076	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathson, Diane <hr/> Contributor address; City; State; Zip Code Edmonds, WA 98026	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Small business owner		Employer (See Instructions) Studio 26 Pilates

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 413/756 Rpt: 416/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathson, Diane <hr/> 6 Contributor address; City; State; Zip Code Edmonds, WA 98026	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Small business owner		9 Employer (See Instructions) Studio 26 Pilates
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathson, Diane <hr/> Contributor address; City; State; Zip Code Edmonds, WA 98026	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Small business owner		Employer (See Instructions) Studio 26 Pilates
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathson, Diane <hr/> Contributor address; City; State; Zip Code Edmonds, WA 98026	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Small business owner		Employer (See Instructions) Studio 26 Pilates
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathson, Diane <hr/> Contributor address; City; State; Zip Code Edmonds, WA 98026	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Small business owner		Employer (See Instructions) Studio 26 Pilates
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matier, Marc <hr/> Contributor address; City; State; Zip Code Canyon Lake, TX 78133	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 414/756 Rpt: 417/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matier, Marc <hr/> 6 Contributor address; City; State; Zip Code Canyon Lake, TX 78133	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maulsby, Sandra <hr/> Contributor address; City; State; Zip Code Forest Hill, MD 21050	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxson, Thomas And Deborah <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15229	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Cohen & Grigsby P.C.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayer-Livingston, Susan <hr/> Contributor address; City; State; Zip Code Shaker Hts., OH 44122	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAfee, Debra <hr/> Contributor address; City; State; Zip Code Louisville, KY 40218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 415/756 Rpt: 418/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBride, Cathy <hr/> 6 Contributor address; City; State; Zip Code Old Forge, PA 18518	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarthy, Timothy <hr/> Contributor address; City; State; Zip Code West Palm Beach, FL 33404	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarthy, Timothy <hr/> Contributor address; City; State; Zip Code West Palm Beach, FL 33404	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarthy, Timothy <hr/> Contributor address; City; State; Zip Code West Palm Beach, FL 33404	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarthy, Timothy <hr/> Contributor address; City; State; Zip Code West Palm Beach, FL 33404	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 416/756 Rpt: 419/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCloud, Carl <hr/> 6 Contributor address; City; State; Zip Code FAYETTEVILLE, NC 28304-2637	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, Judy <hr/> Contributor address; City; State; Zip Code Manchester Township, NJ 08759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, Judy <hr/> Contributor address; City; State; Zip Code Manchester Township, NJ 08759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, Judy <hr/> Contributor address; City; State; Zip Code Manchester Township, NJ 08759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, Judy <hr/> Contributor address; City; State; Zip Code Manchester Township, NJ 08759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 417/756 Rpt: 420/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, Judy <hr/> 6 Contributor address; City; State; Zip Code Manchester Township, NJ 08759	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, Sara <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84105	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions) University of Utah
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, Sonia <hr/> Contributor address; City; State; Zip Code La Habra, CA 90633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, Sonia <hr/> Contributor address; City; State; Zip Code La Habra, CA 90633	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, Sonia <hr/> Contributor address; City; State; Zip Code La Habra, CA 90633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 418/756 Rpt: 421/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCoy, Judy	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Ladera Ranch, CA 92694		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCoy, Judy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Ladera Ranch, CA 92694		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCulloch, Suzanne	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Portland, OR 97239		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCulloch, Suzanne	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Portland, OR 97239		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCulloch, Suzanne	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Portland, OR 97239		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 419/756 Rpt: 422/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCulloch, Suzanne <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97239	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCullough, Anita <hr/> Contributor address; City; State; Zip Code Wichita, KS 67207	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCullough, Anita <hr/> Contributor address; City; State; Zip Code Wichita, KS 67207	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCullough, Phyllis <hr/> Contributor address; City; State; Zip Code Bloomington, IN 47401	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDaniel, Steven <hr/> Contributor address; City; State; Zip Code Knoxville, TN 37924	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Knox County Schools

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 420/756 Rpt: 423/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Byron and Cheryl <hr/> 6 Contributor address; City; State; Zip Code Rhineland, WI 54501	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Byron and Cheryl <hr/> Contributor address; City; State; Zip Code Rhineland, WI 54501	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Susan <hr/> Contributor address; City; State; Zip Code Washington, DC 20008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Susan <hr/> Contributor address; City; State; Zip Code Washington, DC 20008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDowell, Patricia <hr/> Contributor address; City; State; Zip Code Salinas, CA 93907	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 421/756 Rpt: 424/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McFeeters, Monica <hr/> 6 Contributor address; City; State; Zip Code Baldwyn, MS 38824	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGaughey, Sandra <hr/> Contributor address; City; State; Zip Code Fergus Falls, MN 56537	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGaughey, Sandra <hr/> Contributor address; City; State; Zip Code Fergus Falls, MN 56537	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGrath, Mary <hr/> Contributor address; City; State; Zip Code Ventura, CA 93001	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKeever, Joseph <hr/> Contributor address; City; State; Zip Code San Clemente, CA 92673	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 422/756 Rpt: 425/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenna, Patricia <hr/> 6 Contributor address; City; State; Zip Code Wanaque, NJ 07465	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLeod, Bonnie <hr/> Contributor address; City; State; Zip Code Star, NC 27356	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLeod, Janice <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22309	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMann, Azlin <hr/> Contributor address; City; State; Zip Code North Bend, WA 98045	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Project Management		Employer (See Instructions) PanGaia Consulting
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillin, Jennifer <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30319-1323	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 423/756 Rpt: 426/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeill, Nita <hr/> 6 Contributor address; City; State; Zip Code Mustang, OK 73064	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Veterinarian		9 Employer (See Instructions) Nita McNeill
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeill, Nita <hr/> Contributor address; City; State; Zip Code Mustang, OK 73064	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) Nita McNeill
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeill, Nita <hr/> Contributor address; City; State; Zip Code Mustang, OK 73064	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) Nita McNeill
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeill, Nita <hr/> Contributor address; City; State; Zip Code Mustang, OK 73064	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) Nita McNeill
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McQuaid, Peter <hr/> Contributor address; City; State; Zip Code Mill Valley, CA 94941	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 424/756 Rpt: 427/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McQuaid, Peter <hr/> 6 Contributor address; City; State; Zip Code Mill Valley, CA 94941	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McQueen, Dawn <hr/> Contributor address; City; State; Zip Code Swansea, IL 62226	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McVeigh, Rose <hr/> Contributor address; City; State; Zip Code Miami Beach, FL 33240	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McWalters, Thomas <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Self Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McWilliams, W Robert <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 425/756 Rpt: 428/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgrane-Vogel, Marsela <hr/> 6 Contributor address; City; State; Zip Code Murrieta, CA 92562	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcneely, Regina <hr/> Contributor address; City; State; Zip Code Bessemer, AL 35022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcneely, Regina <hr/> Contributor address; City; State; Zip Code Bessemer, AL 35022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcwilliams, Teresa <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93108	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcwilliams, Teresa <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93108	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 426/756 Rpt: 429/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medrano, Diana <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78251	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medrano, Diana <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78251	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meek, Patricia <hr/> Contributor address; City; State; Zip Code Warsaw, NY 14569	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Volunteer Coordinator.		Employer (See Instructions) CCofWNY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meek, Patricia <hr/> Contributor address; City; State; Zip Code Warsaw, NY 14569	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Volunteer Coordinator.		Employer (See Instructions) CCofWNY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meeker, Colleen <hr/> Contributor address; City; State; Zip Code Jacksonville, FL 32250	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) independant contractor		Employer (See Instructions) Shipt

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 427/756 Rpt: 430/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meeker, Colleen <hr/> 6 Contributor address; City; State; Zip Code Jacksonville, FL 32250	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) independant contractor		9 Employer (See Instructions) Shipt
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mehta, Mili <hr/> Contributor address; City; State; Zip Code Irvine, CA 92620	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melanson, Christianne <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-2503	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions) Retired
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melanson, Christianne <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-2503	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions) Retired
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melanson, Christianne <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-2503	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 428/756 Rpt: 431/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melgaard Twork, Peggy	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Knoxville, TN 37934		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melgaard Twork, Peggy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Knoxville, TN 37934		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendez, Eileen M	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LaGrange Pk, IL 60526		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menendez, Louis	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Elk Grove, CA 95758		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mercado, William	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fair Oaks, CA 95628		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 429/756 Rpt: 432/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meredith, Cathy <hr/> 6 Contributor address; City; State; Zip Code Oskaloosa, IA 52577	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Membership rep		9 Employer (See Instructions) nielsen tv ratings
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merley, Ann <hr/> Contributor address; City; State; Zip Code Slingerlands, NY 12159	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merrill, Sally <hr/> Contributor address; City; State; Zip Code Acton, MA 01720	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mershon, Kathryn <hr/> Contributor address; City; State; Zip Code Louisville, KY 40207	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mershon, Kathryn <hr/> Contributor address; City; State; Zip Code Louisville, KY 40207	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 430/756 Rpt: 433/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mershon, Kathryn	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Louisville, KY 40207		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mershon, Kathryn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Louisville, KY 40207		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mershon, Kathryn	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Louisville, KY 40207		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merson, Rose	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Prescott, AZ 86305		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merwin, Diane	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Marshfield, WI 54449		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 431/756 Rpt: 434/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mesh, Deborah	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Nashville, NC 27856		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mesman, Caroline	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Florence, OR 97439		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metzinger, Venita	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Fair Oaks, CA 95628		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Kathleen	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Destin, FL 32541		
Principal occupation / Job title (See Instructions) Sales associate		Employer (See Instructions) Harvest House
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Kathleen	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Destin, FL 32541		
Principal occupation / Job title (See Instructions) Sales associate		Employer (See Instructions) Harvest House

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 432/756 Rpt: 435/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Victoria	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code New York, NY 10011		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Victoria	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code New York, NY 10011		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mickey, Sharon	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Ozark, MO 65721		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mielke, Howard	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Seattle, WA 98105		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mielke, Howard	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Seattle, WA 98105		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 433/756 Rpt: 436/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Harvey	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Baldwin, IA 52207		
8 Principal occupation / Job title (See Instructions) Trucker		9 Employer (See Instructions) Richardson
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Harvey	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Baldwin, IA 52207		
Principal occupation / Job title (See Instructions) Trucker		Employer (See Instructions) Richardson
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Kenneth	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Mount prospect, IL 60056-1951		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Kenneth	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Mount prospect, IL 60056-1951		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Kenneth	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Mount prospect, IL 60056-1951		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 434/756 Rpt: 437/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Kenneth	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code Mount prospect, IL 60056-1951		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Tamara	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Noblesville, IN 46060		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millikan, Jack	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Tacoma, WA 98407		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minkoff, Elaine	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Gaithersburg, MD 20878		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mintz, Roberta	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Boynton Beach, FL 33472		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 435/756 Rpt: 438/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mintz, Roberta <hr/> 6 Contributor address; City; State; Zip Code Boynton Beach, FL 33472	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mintz, Roberta <hr/> Contributor address; City; State; Zip Code Boynton Beach, FL 33472	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mintz, Roberta <hr/> Contributor address; City; State; Zip Code Boynton Beach, FL 33472	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mintz, Roberta <hr/> Contributor address; City; State; Zip Code Boynton Beach, FL 33472	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Billie <hr/> Contributor address; City; State; Zip Code Acme, PA 15610	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 436/756 Rpt: 439/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Billie	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Acme, PA 15610		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Charles	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Linda	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code New York, NY 11101		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Patty	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code New Port Richey, FL 34655		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Velinda W.	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Orem, UT 84058		
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) West Jordan Care Center

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 437/756 Rpt: 440/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Velinda W. <hr/> 6 Contributor address; City; State; Zip Code Orem, UT 84058	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) West Jordan Care Center
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell Jr, G Lewis <hr/> Contributor address; City; State; Zip Code Gadsden, AL 35901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell Jr, G Lewis <hr/> Contributor address; City; State; Zip Code Gadsden, AL 35901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell Jr, G Lewis <hr/> Contributor address; City; State; Zip Code Gadsden, AL 35901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell Jr, G Lewis <hr/> Contributor address; City; State; Zip Code Gadsden, AL 35901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 438/756 Rpt: 441/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell Jr, G Lewis <hr/> 6 Contributor address; City; State; Zip Code Gadsden, AL 35901	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mock, Shirley M <hr/> Contributor address; City; State; Zip Code Memphis, TN 38119-6907	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mock, Shirley M <hr/> Contributor address; City; State; Zip Code Memphis, TN 38119-6907	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moczulski, Patricia <hr/> Contributor address; City; State; Zip Code Nine Mile Falls, WA 99026	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moen, Deborah <hr/> Contributor address; City; State; Zip Code Cambridge, MN 55008	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 439/756 Rpt: 442/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohle, Timothy <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77079	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moley, Pauline <hr/> Contributor address; City; State; Zip Code Lenexa, KS 66215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) University of Central Missouri
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monahan, Laurie <hr/> Contributor address; City; State; Zip Code Freeland, WA 98249	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mongonia, Gloria <hr/> Contributor address; City; State; Zip Code Spring, TX 77380	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mongonia, Gloria <hr/> Contributor address; City; State; Zip Code Spring, TX 77380	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 440/756 Rpt: 443/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montejo, Barbara	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Newhall, CA 91321		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Mary Jane	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Norton Shores, MI 49441		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Mary Jane	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Norton Shores, MI 49441		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montoya, Anthony	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code ALBANY, OR 97321		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mood, Cindy	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Paris, IL 61944		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 441/756 Rpt: 444/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mooney, Edward <hr/> 6 Contributor address; City; State; Zip Code Lake Wylie, SC 29710-7067	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Ali <hr/> Contributor address; City; State; Zip Code Buchanan, GA 30113	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Seamstress		Employer (See Instructions) Family upholstery
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Chris <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions) Kaiser
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Eileen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75228-5134	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Graphic artist		Employer (See Instructions) Self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Janet <hr/> Contributor address; City; State; Zip Code Upland, CA 91784	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 442/756 Rpt: 445/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, John	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Tucson, AZ 85750		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, LuAnn	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Everett, WA 98203		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Marcus	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Norfolk, VA 23505		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Robert	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Derry, NH 03038		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Veronica	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Kapaau, HI 96755		
Principal occupation / Job title (See Instructions) seamstress		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 443/756 Rpt: 446/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Michael <hr/> 6 Contributor address; City; State; Zip Code Ponte Vedra Beach, FL 32082	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Mike <hr/> Contributor address; City; State; Zip Code Ponte Vedra Beach, FL 32082	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Reine <hr/> Contributor address; City; State; Zip Code Morris Plains, NJ 07950	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Kindred hosp
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Reine <hr/> Contributor address; City; State; Zip Code Morris Plains, NJ 07950	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Kindred hosp
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Reine <hr/> Contributor address; City; State; Zip Code Morris Plains, NJ 07950	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Kindred hosp

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 444/756 Rpt: 447/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Reine <hr/> 6 Contributor address; City; State; Zip Code Morris Plains, NJ 07950	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Kindred hosp
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morel, Rosanne <hr/> Contributor address; City; State; Zip Code Ludlow, MA 01056-1856	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreno, Robin <hr/> Contributor address; City; State; Zip Code San Ramon, CA 94583	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreno, Robin <hr/> Contributor address; City; State; Zip Code San Ramon, CA 94583	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Donna <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11231	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 445/756 Rpt: 448/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Donna <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11231	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Donna <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Laura <hr/> Contributor address; City; State; Zip Code Tacoma, WA 98403	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Laura <hr/> Contributor address; City; State; Zip Code Tacoma, WA 98403	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Laura <hr/> Contributor address; City; State; Zip Code Tacoma, WA 98403	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 446/756 Rpt: 449/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Laura	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Tacoma, WA 98403		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Laura	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Tacoma, WA 98403		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Laura	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Tacoma, WA 98403		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Laura	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Tacoma, WA 98403		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Laura	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Tacoma, WA 98403		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 447/756 Rpt: 450/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Milton <hr/> 6 Contributor address; City; State; Zip Code Columbia, SC 29223	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Not saying
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Constance <hr/> Contributor address; City; State; Zip Code Oviedo, FL 32765	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison-Hall, Gail <hr/> Contributor address; City; State; Zip Code Wyncote, PA 19095	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison-Hall, Gail <hr/> Contributor address; City; State; Zip Code Wyncote, PA 19095	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison-Hall, Gail <hr/> Contributor address; City; State; Zip Code Wyncote, PA 19095	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 448/756 Rpt: 451/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison-Hall, Gail <hr/> 6 Contributor address; City; State; Zip Code Wyncote, PA 19095	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrow, Laura <hr/> Contributor address; City; State; Zip Code Aubrey, TX 76227-5325	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moseley, Rick <hr/> Contributor address; City; State; Zip Code Saint Petersburg, FL 33715	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moshirnia, Kathleen <hr/> Contributor address; City; State; Zip Code Stockton, CA 95219	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moshirnia, Kathleen <hr/> Contributor address; City; State; Zip Code Stockton, CA 95219	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 449/756 Rpt: 452/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moshirnia, Kathy <hr/> 6 Contributor address; City; State; Zip Code Stockton, CA 95219	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, James <hr/> Contributor address; City; State; Zip Code Lee, NH 03861	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) cashier		Employer (See Instructions) market basket
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Most, Jordan <hr/> Contributor address; City; State; Zip Code Scotch Plains, NJ 07076	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bryan Cave Leighton Paisner
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moulton, Karyn <hr/> Contributor address; City; State; Zip Code Lowell, MI 49331	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moulton, Karyn <hr/> Contributor address; City; State; Zip Code Lowell, MI 49331	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 450/756 Rpt: 453/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mountjoy, Natalie	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Bowling Green, KY 42103		
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Wku
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mourray, Cher	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Clarkston, MI 48346		
Principal occupation / Job title (See Instructions) Stylist		Employer (See Instructions) LaMarquise
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mozon, Nadine	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Austin, TX 78723		
Principal occupation / Job title (See Instructions) Artist /Educator		Employer (See Instructions) Texas State University
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mrvos, Richard	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COLLINSVILLE, IL 62234		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mrvos, Richard	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COLLINSVILLE, IL 62234		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 451/756 Rpt: 454/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mrvos, Richard	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code COLLINSVILLE, IL 62234		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mudrovich, Ellen	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Fort Worth, TX 76116		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mudrovich, Ellen	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Fort Worth, TX 76116		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mudrovich, Ellen	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Fort Worth, TX 76116		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mudrovich, Ellen	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Fort Worth, TX 76116		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 452/756 Rpt: 455/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mudrovich, Ellen <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76116	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mumma, Chris <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munns, Joseph <hr/> Contributor address; City; State; Zip Code West deptford, NJ 08066	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Computer programming		Employer (See Instructions) Willis Towers Watson
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munns, Joseph <hr/> Contributor address; City; State; Zip Code West deptford, NJ 08066	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Computer programming		Employer (See Instructions) Willis Towers Watson
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munoz, Ernest <hr/> Contributor address; City; State; Zip Code Glendale, AZ 85304	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Civil engineering designer		Employer (See Instructions) Kaeko inc

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 453/756 Rpt: 456/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munroe, Michael 6 Contributor address; City; State; Zip Code Alachua, FL 32615	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Graduate Student - Science Communication		9 Employer (See Instructions) University of Florida
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munroe, Michael Contributor address; City; State; Zip Code Alachua, FL 32615	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Graduate Student - Science Communication		Employer (See Instructions) University of Florida
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murakami, Chris Contributor address; City; State; Zip Code Torrance, CA 90505	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Marylou Contributor address; City; State; Zip Code San Rafael, CA 94901	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Pat Contributor address; City; State; Zip Code MARION, IA 52302	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 454/756 Rpt: 457/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Pat <hr/> 6 Contributor address; City; State; Zip Code MARION, IA 52302	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Thomas <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20903	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Kathleen <hr/> Contributor address; City; State; Zip Code Clarksville, TN 37043	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Cmcss
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Lois <hr/> Contributor address; City; State; Zip Code New Haven, CT 06513	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Nora <hr/> Contributor address; City; State; Zip Code West Columbia, SC 29169	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 455/756 Rpt: 458/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muscott, Amy Jo	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Amherst, NH 03031		
8 Principal occupation / Job title (See Instructions) Advocate		9 Employer (See Instructions) Bridges
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muscott, Amy Jo	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Amherst, NH 03031		
Principal occupation / Job title (See Instructions) Advocate		Employer (See Instructions) crisis center
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mushinski, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Murrieta, CA 92562		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mushinski, John	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code Murrieta, CA 92562		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mushinski, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Murrieta, CA 92562		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 456/756 Rpt: 459/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myles, Raymond	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Saint John, IN 46373		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASSEN, KENT	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Pinckney, MI 48169		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASSEN, KENT	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Pinckney, MI 48169		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nachman, Mark	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Brodheads ville, PA 18322		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nagy, Rebecca	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Milton, FL 32583		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 457/756 Rpt: 460/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nakashima, Anna <hr/> 6 Contributor address; City; State; Zip Code Delavan, WI 53115	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Napoletano, Linda <hr/> Contributor address; City; State; Zip Code East Hampton, CT 06424	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Narayan, Randhir <hr/> Contributor address; City; State; Zip Code Moorpark, CA 93021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Narvaez, Priscilla <hr/> Contributor address; City; State; Zip Code Tulsa, OK 74112	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Tulsa Public Schools
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash, Carmen <hr/> Contributor address; City; State; Zip Code Manhattan, NY 10010	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Switchboard operator		Employer (See Instructions) BMI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 458/756 Rpt: 461/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash, Jo <hr/> 6 Contributor address; City; State; Zip Code Moberly, MO 65270-4579	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash, Simone <hr/> Contributor address; City; State; Zip Code Detroit, MI 48202	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Caregiver		Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash, Simone <hr/> Contributor address; City; State; Zip Code Detroit, MI 48202	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Caregiver		Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathan, Susan <hr/> Contributor address; City; State; Zip Code Dennisport, MA 02639	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Recruiter		Employer (See Instructions) Advocates
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, Savinia <hr/> Contributor address; City; State; Zip Code Stamford, CT 06901	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 459/756 Rpt: 462/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neale, Lucy <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92104	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neff, David <hr/> Contributor address; City; State; Zip Code Brunswick, OH 44212	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neff, Deon <hr/> Contributor address; City; State; Zip Code Gaithersburg, MD 20882	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neff, Deon <hr/> Contributor address; City; State; Zip Code Gaithersburg, MD 20882	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Deon Neff
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neilson, Marcie <hr/> Contributor address; City; State; Zip Code Concord, CA 94519	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sr. Business Analyst		Employer (See Instructions) W.A. Hynes & Co.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 460/756 Rpt: 463/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Donna <hr/> 6 Contributor address; City; State; Zip Code Woodbury, MN 55125	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Sally <hr/> Contributor address; City; State; Zip Code Apple Valley, MN 55124	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Sue <hr/> Contributor address; City; State; Zip Code Lutz, FL 33548	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Sue <hr/> Contributor address; City; State; Zip Code Lutz, FL 33548	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nerenberg, Alan <hr/> Contributor address; City; State; Zip Code Santa Cruz, CA 95060	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 461/756 Rpt: 464/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nesting, Marie <hr/> 6 Contributor address; City; State; Zip Code Wausau, WI 54401	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neubauer, Ann <hr/> Contributor address; City; State; Zip Code Shelbina, MO 63468	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Shelby County R-IV School District
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neuman, Daniel <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90049	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Faculty		Employer (See Instructions) UCLA
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeyer, Susan <hr/> Contributor address; City; State; Zip Code Orlando, FL 32805	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeyer, Susan <hr/> Contributor address; City; State; Zip Code Orlando, FL 32805	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 462/756 Rpt: 465/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeyer, Susan	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Orlando, FL 32805		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeyer, Susan	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Orlando, FL 32805		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newcomb, Debbie	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Conneaut, OH 44030		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neyer, Nancy	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Long Beach, CA 90803		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neyer, Nancy	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Long Beach, CA 90803		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 463/756 Rpt: 466/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neyer, Nancy <hr/> 6 Contributor address; City; State; Zip Code Long Beach, CA 90803	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neyer, Nancy <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90803	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neyer, Nancy <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90803	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neyer, Nancy <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90803	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neyer, Nancy <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90803	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 464/756 Rpt: 467/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neylon, Mike <hr/> 6 Contributor address; City; State; Zip Code St Joseph, MO 64507	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ng, Peter <hr/> Contributor address; City; State; Zip Code Conover, NC 28613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Barbara <hr/> Contributor address; City; State; Zip Code Glenview, IL 60025	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Barbara <hr/> Contributor address; City; State; Zip Code Glenview, IL 60025	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Barbara <hr/> Contributor address; City; State; Zip Code Glenview, IL 60025	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 465/756 Rpt: 468/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Barbara	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Glenview, IL 60025		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Barbara	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Glenview, IL 60025		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Barbara	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Glenview, IL 60025		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Barbara	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Glenview, IL 60025		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Barbara	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Glenview, IL 60025		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 466/756 Rpt: 469/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Barbara <hr/> 6 Contributor address; City; State; Zip Code Glenview, IL 60025	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Barbara <hr/> Contributor address; City; State; Zip Code Glenview, IL 60025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Barbara <hr/> Contributor address; City; State; Zip Code Glenview, IL 60025	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Barbara <hr/> Contributor address; City; State; Zip Code Glenview, IL 60025	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niemann, Judith <hr/> Contributor address; City; State; Zip Code Arvada, CO 80007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 467/756 Rpt: 470/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nienhaus, Yolanda <hr/> 6 Contributor address; City; State; Zip Code Chesterfield, MO 63017	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niese, Gary <hr/> Contributor address; City; State; Zip Code Fairbanks, AK 99701	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nitzberg, Neil J <hr/> Contributor address; City; State; Zip Code Port Matilda, PA 16870-8329	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nix, Robert <hr/> Contributor address; City; State; Zip Code Houston, TX 77065	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nix, Robert <hr/> Contributor address; City; State; Zip Code Houston, TX 77065	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 468/756 Rpt: 471/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nixon, Patricia <hr/> 6 Contributor address; City; State; Zip Code Winston Salem, NC 27104-2630	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Wake Forest University
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Barbara <hr/> Contributor address; City; State; Zip Code Portland, OR 97267	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Kellie <hr/> Contributor address; City; State; Zip Code Jackson, MI 49202	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Northcutt, Gail <hr/> Contributor address; City; State; Zip Code Covington, KY 41011	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Northcutt, Gail <hr/> Contributor address; City; State; Zip Code Covington, KY 41011	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 469/756 Rpt: 472/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norton, Nick <hr/> 6 Contributor address; City; State; Zip Code Salt Lake City, UT 84105	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ntiamoah, Barbara <hr/> Contributor address; City; State; Zip Code Chandler, AZ 85286	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Financial Services Rep		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Loughlin, Nancy <hr/> Contributor address; City; State; Zip Code Turner, OR 97392	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neil, Jamie <hr/> Contributor address; City; State; Zip Code Desert Hot Springs, CA 92241	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Palm Springs USD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neil, Jamie <hr/> Contributor address; City; State; Zip Code Desert Hot Springs, CA 92241	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Palm Springs USD

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 470/756 Rpt: 473/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neil, Michael	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Hillsboro, OR 97124-8151		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neil, Michael	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Hillsboro, OR 97124-8151		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neil, Michael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Hillsboro, OR 97124-8151		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neil, Michael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Hillsboro, OR 97124-8151		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Sandra	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Madbury, NH 03823		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 471/756 Rpt: 474/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Rorke, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Las Cruces, NC 88012-6277	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Sullivan, Eddie <hr/> Contributor address; City; State; Zip Code Brentwood, NY 11717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ODonnell, Helen <hr/> Contributor address; City; State; Zip Code Beaver, PA 15009-2823	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, MICHAEL <hr/> Contributor address; City; State; Zip Code AUBURN, ME 04210	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, MICHAEL <hr/> Contributor address; City; State; Zip Code AUBURN, ME 04210	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 472/756 Rpt: 475/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code AUBURN, ME 04210	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, MICHAEL <hr/> Contributor address; City; State; Zip Code AUBURN, ME 04210	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, MICHAEL <hr/> Contributor address; City; State; Zip Code AUBURN, ME 04210	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLOUGHLIN, Nancy <hr/> Contributor address; City; State; Zip Code Turner, OR 97392	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLoughlin, Nancy <hr/> Contributor address; City; State; Zip Code Turner, OR 97392	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 473/756 Rpt: 476/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLoughlin, Nancy <hr/> 6 Contributor address; City; State; Zip Code Turner, OR 97392	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLoughlin, Nancy <hr/> Contributor address; City; State; Zip Code Turner, OR 97392	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORNE, JANE <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11238	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORNE, JANE <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11238	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OShaughnessy, Patricia <hr/> Contributor address; City; State; Zip Code Naperville, IL 60563	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 474/756 Rpt: 477/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OShaughnessy, Patricia <hr/> 6 Contributor address; City; State; Zip Code Naperville, IL 60563	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OShaughnessy, Patricia <hr/> Contributor address; City; State; Zip Code Naperville, IL 60563	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSullivan, Theresa <hr/> Contributor address; City; State; Zip Code Evergreen, CO 80439	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSullivan, Theresa <hr/> Contributor address; City; State; Zip Code Evergreen, CO 80439-5215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ockey, Lee <hr/> Contributor address; City; State; Zip Code Modesto, CA 95354	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 475/756 Rpt: 478/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oelke, Robert	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Montello, WI 53949		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogletree, Nevolia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Ewing, NJ 08628		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogugua, Ugwunna	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Bronx, NY 10466		
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions) Besmatch Real Estate
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ohidy, Sandra	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Fort White, FL 32038		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Susanne	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Monroe, WA 98272		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 476/756 Rpt: 479/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ong, Peggy <hr/> 6 Contributor address; City; State; Zip Code Henderson, NV 89012	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onufer, Elaine <hr/> Contributor address; City; State; Zip Code Redwood City, CA 94061	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Linda <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89103	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Linda <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Trent <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 477/756 Rpt: 480/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orrico, Mario	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Chicago, IL 60631		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ort, Kelly	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Monkton, MD 21111		
Principal occupation / Job title (See Instructions) Dietitian		Employer (See Instructions) Univ of Md med center
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ort, Kelly	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Monkton, MD 21111		
Principal occupation / Job title (See Instructions) Dietitian		Employer (See Instructions) Univ of Md med center
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortix, Jorge	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Killeen, TX 76543		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortix, Jorge	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Killeen, TX 76543		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 478/756 Rpt: 481/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Jeannie	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Vista, CA 92083		
8 Principal occupation / Job title (See Instructions) Lab tech; teacher artist		9 Employer (See Instructions) Dtek Laboratories
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Jeannie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Vista, CA 92083		
Principal occupation / Job title (See Instructions) Lab tech; teacher artist		Employer (See Instructions) Dtek Laboratories
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Jeannie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Vista, CA 92083		
Principal occupation / Job title (See Instructions) Lab tech; teacher artist		Employer (See Instructions) Dtek Laboratories
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Jeannie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Vista, CA 92083		
Principal occupation / Job title (See Instructions) Lab tech; teacher artist		Employer (See Instructions) Dtek Laboratories
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Jeannie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Vista, CA 92083		
Principal occupation / Job title (See Instructions) Lab tech; teacher artist		Employer (See Instructions) Dtek Laboratories

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 479/756 Rpt: 482/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Jeannie <hr/> 6 Contributor address; City; State; Zip Code Vista, CA 92083	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Lab tech; teacher artist		9 Employer (See Instructions) Dtek Laboratories
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Jeannie <hr/> Contributor address; City; State; Zip Code Vista, CA 92083	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Lab tech; teacher artist		Employer (See Instructions) Dtek Laboratories
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Jeannie <hr/> Contributor address; City; State; Zip Code Vista, CA 92083	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Lab tech; teacher artist		Employer (See Instructions) Dtek Laboratories
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Manuela <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94602-3103	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Manuela <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94602-3103	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 480/756 Rpt: 483/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osa, Osaguona <hr/> 6 Contributor address; City; State; Zip Code Alpharetta, GA 30004	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) healthcare		9 Employer (See Instructions) teamh
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osika, Betsy <hr/> Contributor address; City; State; Zip Code Apple River, IL 61001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osika, Betsy <hr/> Contributor address; City; State; Zip Code Mokena, IL 60448	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osofsky, William <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87194	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osofsky, William <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87194	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 481/756 Rpt: 484/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osofsky, William <hr/> 6 Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87194	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osofsky, William <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87194	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osowski, Ken <hr/> Contributor address; City; State; Zip Code Dixon, CA 95620	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostroff, Paul <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19115	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostroff, Paul <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19115	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 482/756 Rpt: 485/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostroot, John <hr/> 6 Contributor address; City; State; Zip Code Golden Valley, MN 55422	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Jon <hr/> Contributor address; City; State; Zip Code Franklin, TN 37067	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Dominican Campus
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Leary, Shea <hr/> Contributor address; City; State; Zip Code Beaverton, OR 97008	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Leary, Shea <hr/> Contributor address; City; State; Zip Code Beaverton, OR 97008	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Leary, Shea <hr/> Contributor address; City; State; Zip Code Beaverton, OR 97008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 483/756 Rpt: 486/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Leary, Shea <hr/> 6 Contributor address; City; State; Zip Code Beaverton, OR 97008	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Leary, Shea <hr/> Contributor address; City; State; Zip Code Beaverton, OR 97008	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Leary, Shea <hr/> Contributor address; City; State; Zip Code Beaverton, OR 97008	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Leary, Shea <hr/> Contributor address; City; State; Zip Code Beaverton, OR 97008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Leary, Shea <hr/> Contributor address; City; State; Zip Code Beaverton, OR 97008	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 484/756 Rpt: 487/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacheco, Maria	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Los Altos, CA 94022		
8 Principal occupation / Job title (See Instructions) Technology		9 Employer (See Instructions) Google
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacheco, Maria	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Los Altos, CA 94022		
Principal occupation / Job title (See Instructions) Technology		Employer (See Instructions) Google
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacheco, Maria	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Los Altos, CA 94022		
Principal occupation / Job title (See Instructions) Technology		Employer (See Instructions) Google
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacheco, Maria	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Los Altos, CA 94022		
Principal occupation / Job title (See Instructions) Technology		Employer (See Instructions) Google
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Packer, Philip	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Los Altos, CA 94022		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 485/756 Rpt: 488/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Packer, Philip <hr/> 6 Contributor address; City; State; Zip Code Los Altos, CA 94022	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padilla, George <hr/> Contributor address; City; State; Zip Code Alamogordo, NM 88310	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Elaine <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22911	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) T.J.F. Foundation
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Prudence <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87109	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Rita and Johnny <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 486/756 Rpt: 489/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Rita and Johnny <hr/> 6 Contributor address; City; State; Zip Code Mansfield, TX 76063	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pajac, Lory <hr/> Contributor address; City; State; Zip Code Grantsburg, WI 54840	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palen, Frank <hr/> Contributor address; City; State; Zip Code Lake Worth, FL 33460	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Caldwell Pacetti et al
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 487/756 Rpt: 490/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> 6 Contributor address; City; State; Zip Code Gilroy, CA 95020	7 Amount of Contribution (\$) \$9.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 488/756 Rpt: 491/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> 6 Contributor address; City; State; Zip Code Gilroy, CA 95020	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 489/756 Rpt: 492/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> 6 Contributor address; City; State; Zip Code Gilroy, CA 95020	7 Amount of Contribution (\$) \$9.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Allen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pao, Juliet <hr/> Contributor address; City; State; Zip Code WILLIAMSBURG, VA 23185-8929	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 490/756 Rpt: 493/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parken, Judy	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Austin, TX 78731		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Timothy	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Evans, GA 30809		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Timothy	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Evans, GA 30809		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker D.C., Bruce	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Malibu, CA 90265		
Principal occupation / Job title (See Instructions) Chiropractor		Employer (See Instructions) Self
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pashote, Kathy	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Livermore, CA 94550		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 491/756 Rpt: 494/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastrana, Jose <hr/> 6 Contributor address; City; State; Zip Code Lumberton, TX 77657	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastrana, Jose <hr/> Contributor address; City; State; Zip Code Lumberton, TX 77657	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pate, Sheila <hr/> Contributor address; City; State; Zip Code Laurinburg, NC 28352	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pate, Sheila <hr/> Contributor address; City; State; Zip Code Laurinburg, NC 28352	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Premila <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37421	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 492/756 Rpt: 495/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patil, Shree <hr/> 6 Contributor address; City; State; Zip Code Westford, MA 01886	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Red Hat
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, John <hr/> Contributor address; City; State; Zip Code Lexington, KY 40511	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, John <hr/> Contributor address; City; State; Zip Code Lexington, KY 40511	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, John <hr/> Contributor address; City; State; Zip Code Lexington, KY 40511	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, John <hr/> Contributor address; City; State; Zip Code Lexington, KY 40511	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 493/756 Rpt: 496/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, John <hr/> 6 Contributor address; City; State; Zip Code Lexington, KY 40511	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, John <hr/> Contributor address; City; State; Zip Code Lexington, KY 40511	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, John <hr/> Contributor address; City; State; Zip Code Lexington, KY 40511	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, John <hr/> Contributor address; City; State; Zip Code Lexington, KY 40511	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, John <hr/> Contributor address; City; State; Zip Code Lexington, KY 40511	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 494/756 Rpt: 497/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, John	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Lexington, KY 40511		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pavlovich, Valerie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Silvis, IL 61282-1025		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pavlovich, Valerie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Silvis, IL 61282-1025		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paxton, Cheryl	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Vancouver, WA 98684		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Barkley	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Scottsdale, AZ 85255		
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) liO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 495/756 Rpt: 498/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paysse, Evelyn	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Houston, TX 77005		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paysse, Evelyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77019		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paysse, Evelyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77019		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paysse, Evelyn	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77019		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paysse, Evelyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77019		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 496/756 Rpt: 499/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paz-Jacobs, Rosa <hr/> 6 Contributor address; City; State; Zip Code Haiku, HI 96708	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peck, Susan <hr/> Contributor address; City; State; Zip Code Mill Valley, CA 94941	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peduzzi, Martin <hr/> Contributor address; City; State; Zip Code Beaver, PA 15009	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peduzzi, Martin <hr/> Contributor address; City; State; Zip Code Beaver, PA 15009	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peel, Emily <hr/> Contributor address; City; State; Zip Code North Port, FL 34287	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 497/756 Rpt: 500/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peel, Emily <hr/> 6 Contributor address; City; State; Zip Code North Port, FL 34287	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peel, Emily <hr/> Contributor address; City; State; Zip Code North Port, FL 34287	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peel, Emily <hr/> Contributor address; City; State; Zip Code North Port, FL 34287	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peguero, Antonio <hr/> Contributor address; City; State; Zip Code Renton, WA 98058	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peoples, Tywana <hr/> Contributor address; City; State; Zip Code Springfield, TN 37172	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 498/756 Rpt: 501/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Marco <hr/> 6 Contributor address; City; State; Zip Code DeKalb, IL 60115	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Roofing		9 Employer (See Instructions) Greenshield
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Marco <hr/> Contributor address; City; State; Zip Code DeKalb, IL 60115	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Roofing		Employer (See Instructions) Greenshield
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pershing, Suzanne <hr/> Contributor address; City; State; Zip Code San Leandro, CA 94577	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterfreund, Jay <hr/> Contributor address; City; State; Zip Code Lake Worth, FL 33467	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Gary <hr/> Contributor address; City; State; Zip Code Cheyenne, WY 82003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) School Custodian		Employer (See Instructions) LCSD#1Chey. WY

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 499/756 Rpt: 502/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Gene	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code San Diego, CA 92128		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) FRCSW
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Gene	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code San Diego, CA 92128		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) FRCSW
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Gene	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code San Diego, CA 92128		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) FRCSW
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Gene	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code San Diego, CA 92128		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) FRCSW
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Gene	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code San Diego, CA 92128		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) FRCSW

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 500/756 Rpt: 503/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Gene <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92128	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) FRCSW
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, James <hr/> Contributor address; City; State; Zip Code West Chester, PA 19380	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) Ardmore animal hospital
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, James <hr/> Contributor address; City; State; Zip Code West Chester, PA 19380	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) Ardmore animal hospital
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petersen, Albert <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02138	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petersen, Todd <hr/> Contributor address; City; State; Zip Code Seattle, WA 98126	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 501/756 Rpt: 504/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Raymond <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10301	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petitt-Milnes, Carol <hr/> Contributor address; City; State; Zip Code South Plymouth, NY 13844	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrizzo, Richard <hr/> Contributor address; City; State; Zip Code Davis Junction, IL 61020	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrizzo, Richard <hr/> Contributor address; City; State; Zip Code Davis Junction, IL 61020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrizzo, Richard <hr/> Contributor address; City; State; Zip Code Davis Junction, IL 61020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 502/756 Rpt: 505/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrizzo, Richard <hr/> 6 Contributor address; City; State; Zip Code Davis Junction, IL 61020	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrizzo, Richard <hr/> Contributor address; City; State; Zip Code Davis Junction, IL 61020	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrizzo, Richard <hr/> Contributor address; City; State; Zip Code Davis Junction, IL 61020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrizzo, Richard <hr/> Contributor address; City; State; Zip Code Davis Junction, IL 61020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrosky, Lorraine <hr/> Contributor address; City; State; Zip Code Wexford, PA 15090	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 503/756 Rpt: 506/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pettas, Mary <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60647	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petterson McGraw, Laurel <hr/> Contributor address; City; State; Zip Code Kapaa, HI 96746	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pettit, Glen <hr/> Contributor address; City; State; Zip Code Portland, OR 97212-2065	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pettit, Glen <hr/> Contributor address; City; State; Zip Code Portland, OR 97212-2065	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pettit, Glen <hr/> Contributor address; City; State; Zip Code Portland, OR 97212-2065	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 504/756 Rpt: 507/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pfeiffer, Nancy 6 Contributor address; City; State; Zip Code Hoschton, GA 30548	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pfeiffer, Nancy Contributor address; City; State; Zip Code Hoschton, GA 30548	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pfiester, R E Contributor address; City; State; Zip Code Los Angeles, CA 90039	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Self
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pfiester, R E Contributor address; City; State; Zip Code Los Angeles, CA 90039	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pharis, Shirley Contributor address; City; State; Zip Code Little Rock, AR 72211	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 505/756 Rpt: 508/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pharr, Reginald <hr/> 6 Contributor address; City; State; Zip Code Concord, NC 28025	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Minister		9 Employer (See Instructions) Faith FELLOWSHIP
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philamlee, Whitney <hr/> Contributor address; City; State; Zip Code Little Rock, AR 72211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Conway Regional Medical Center
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Cindy <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickens, Mark <hr/> Contributor address; City; State; Zip Code ROYAL OAK, MI 48073	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickens, Mark <hr/> Contributor address; City; State; Zip Code ROYAL OAK, MI 48073	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 506/756 Rpt: 509/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickens, Mark <hr/> 6 Contributor address; City; State; Zip Code ROYAL OAK, MI 48073	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickens, Mark <hr/> Contributor address; City; State; Zip Code ROYAL OAK, MI 48073	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickens, Mark <hr/> Contributor address; City; State; Zip Code ROYAL OAK, MI 48073	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickens, Mark <hr/> Contributor address; City; State; Zip Code ROYAL OAK, MI 48073	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piela, Diane <hr/> Contributor address; City; State; Zip Code Kailua Kona, HI 96740	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 507/756 Rpt: 510/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Yvonne <hr/> 6 Contributor address; City; State; Zip Code Bronx, NY 10475	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Yvonne <hr/> Contributor address; City; State; Zip Code Bronx, NY 10475	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pimentel, Susan <hr/> Contributor address; City; State; Zip Code Fort Myers, FL 33916	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ed consultant		Employer (See Instructions) self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pincombe, Roxanne <hr/> Contributor address; City; State; Zip Code Casa Grande, AZ 85122	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinol, Felix <hr/> Contributor address; City; State; Zip Code Clearwater Beach, FL 33767	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 508/756 Rpt: 511/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinol, Felix	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Clearwater Beach, FL 33767		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitre, Anita	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Fort Mill, SC 29708		
Principal occupation / Job title (See Instructions) Tick		Employer (See Instructions) MS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitt, Eleanor	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code West Haven, CT 06516		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitts, Berlethia J	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Macon, GA 31220		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) FVSU
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pizzi, Elise	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Philadelphia, PA 19128		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 509/756 Rpt: 512/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plant, Stanley <hr/> 6 Contributor address; City; State; Zip Code Franktown, CO 80116	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Luthier		9 Employer (See Instructions) Self-employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plastiras, Basil <hr/> Contributor address; City; State; Zip Code Novato, CA 94949	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Plastiras & Terrizzi apc
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plata, Cecilia <hr/> Contributor address; City; State; Zip Code LaConner, WA 98257	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plaza, Dorothy <hr/> Contributor address; City; State; Zip Code Fair Lawn, NJ 07410	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plaza, Dorothy <hr/> Contributor address; City; State; Zip Code Fair Lawn, NJ 07410	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 510/756 Rpt: 513/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plaza, Dorothy	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Fair Lawn, NJ 07410		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plaza, Dorothy	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Fair Lawn, NJ 07410		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plaza, Dorothy	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Fair Lawn, NJ 07410		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plaza, Dorothy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Fair Lawn, NJ 07410		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pola, Marta	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Baltimore, MD 21210		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 511/756 Rpt: 514/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polino, Anne <hr/> 6 Contributor address; City; State; Zip Code Westminster, CO 80031	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polissaint, Michael <hr/> Contributor address; City; State; Zip Code Uniondale, NY 11553	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) AIG
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Politis, Debora <hr/> Contributor address; City; State; Zip Code Syracuse, NY 13214	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pomerance, Ken <hr/> Contributor address; City; State; Zip Code Fort Lauderdale, FL 33328	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) InTheRooms.com
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Popinchalk, Paul <hr/> Contributor address; City; State; Zip Code Worcester, MA 01602	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 512/756 Rpt: 515/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Popp, Darlene <hr/> 6 Contributor address; City; State; Zip Code New Berlin, WI 53151	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Popp, Nancy <hr/> Contributor address; City; State; Zip Code Yarmouth, MA 02673	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Popp, Nancy <hr/> Contributor address; City; State; Zip Code Yarmouth, MA 02673	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Popp, Nancy <hr/> Contributor address; City; State; Zip Code Yarmouth, MA 02673	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Popp, Nancy <hr/> Contributor address; City; State; Zip Code Yarmouth, MA 02673	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 513/756 Rpt: 516/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Popp, Nancy <hr/> 6 Contributor address; City; State; Zip Code Yarmouth, MA 02673	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Popp, Nancy <hr/> Contributor address; City; State; Zip Code Yarmouth, MA 02673	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Popp, Nancy <hr/> Contributor address; City; State; Zip Code Yarmouth, MA 02673	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Popp, Nancy <hr/> Contributor address; City; State; Zip Code Yarmouth, MA 02673	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Populis, Harry <hr/> Contributor address; City; State; Zip Code Fort Jones, CA 96032	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 514/756 Rpt: 517/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Katherine	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Woodbury, MN 55129		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Katherine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Woodbury, MN 55129		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Katherine	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Woodbury, MN 55129		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Katherine	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Woodbury, MN 55129		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter-Nielsen, Richard	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Diego, CA 92106		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 515/756 Rpt: 518/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter-Nielsen, Richard <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92106	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porton, Cindy <hr/> Contributor address; City; State; Zip Code Clovis, CA 93611	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poshpeck, Rich <hr/> Contributor address; City; State; Zip Code Brentwood, NH 03833	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) none
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Posnett, David <hr/> Contributor address; City; State; Zip Code Cutchogue, NY 11935	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Posnett, David <hr/> Contributor address; City; State; Zip Code Cutchogue, NY 11935	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 516/756 Rpt: 519/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potter, Ann <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78723	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potter, Ann <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Povich, Ron <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22901	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Kathleen <hr/> Contributor address; City; State; Zip Code Worcester, MA 01608	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Computer Systems Engineer		Employer (See Instructions) NTTDATA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prenner, Allen <hr/> Contributor address; City; State; Zip Code Bronx, NY 10463	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Mosaic MH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 517/756 Rpt: 520/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pressgrove, Cheryl	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Vanleer, TN 37181		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Preston, Andrew	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Durham, NC 27707		
Principal occupation / Job title (See Instructions) Nursing assistant		Employer (See Instructions) Homewatch caregivers
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Principato, Elizabeth	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code New York, NY 10009		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Principato, Elizabeth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New York, NY 10009		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Privitera, Cecilia	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Egg Harbor Township, NJ 08234		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 518/756 Rpt: 521/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prout, Jo <hr/> 6 Contributor address; City; State; Zip Code Tahlequah, OK 74464	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) administrator		9 Employer (See Instructions) CASA of Cherokee Country
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prout, Jo <hr/> Contributor address; City; State; Zip Code Tahlequah, OK 74464	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) administrator		Employer (See Instructions) CASA of Cherokee Country
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Puckett, Tom <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85715	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pullen, Wesley <hr/> Contributor address; City; State; Zip Code Surprise, AZ 85374	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Clinical Therapist		Employer (See Instructions) Gentle Path at The Meadows
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purcell, Susanne <hr/> Contributor address; City; State; Zip Code Mead, CO 80542-4034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 519/756 Rpt: 522/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purcell, Susanne <hr/> 6 Contributor address; City; State; Zip Code Mead, CO 80542-4034	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purington, Deborah <hr/> Contributor address; City; State; Zip Code Tolland, CT 06084	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUILLO, TED <hr/> Contributor address; City; State; Zip Code Henderson, NV 89014	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Qirko, Ingrid <hr/> Contributor address; City; State; Zip Code San Diego, CA 92116	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Warren-Walker
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Queen, Janice <hr/> Contributor address; City; State; Zip Code Lexington, NC 27292	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 520/756 Rpt: 523/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, John <hr/> 6 Contributor address; City; State; Zip Code AUBURN, AL 36830	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quintero, Alicia <hr/> Contributor address; City; State; Zip Code Chicago, IL 60659	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Cps
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quintero, Alicia <hr/> Contributor address; City; State; Zip Code Chicago, IL 60659	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Cps
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quiros, Augusto <hr/> Contributor address; City; State; Zip Code New York, NY 10034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) DOE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quiros, Augusto <hr/> Contributor address; City; State; Zip Code New York, NY 10034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) DOE

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 521/756 Rpt: 524/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quiros, Augusto <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10034	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Education		9 Employer (See Instructions) DOE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHAMES, SANDRA <hr/> Contributor address; City; State; Zip Code Rochester, MI 48309	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, SIMON <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions) PT PRODUCTS AND SERVICES INC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radel, Richard <hr/> Contributor address; City; State; Zip Code Stillwater, MN 55082-5370	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rafferty, John <hr/> Contributor address; City; State; Zip Code Emeryville, CA 94608	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Marketing Director		Employer (See Instructions) TRIC Tools Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 522/756 Rpt: 525/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raineey, Derek <hr/> 6 Contributor address; City; State; Zip Code Portland, MI 48875	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raineey, Derek <hr/> Contributor address; City; State; Zip Code Portland, MI 48875	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramankutty, Jayan <hr/> Contributor address; City; State; Zip Code Fremont, CA 94539	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramankutty, Jayan <hr/> Contributor address; City; State; Zip Code Fremont, CA 94539	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Mary <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 523/756 Rpt: 526/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Mary <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78626	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Rick <hr/> Contributor address; City; State; Zip Code St. Louis, MO 63130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Susan <hr/> Contributor address; City; State; Zip Code Wayne, NJ 07470	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randall, Cheryl <hr/> Contributor address; City; State; Zip Code Salem, OR 97301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randall, Cheryl <hr/> Contributor address; City; State; Zip Code Salem, OR 97301	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 524/756 Rpt: 527/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randall, Cheryl	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Salem, OR 97301		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randle, Goldie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code North Augusta, SC 29860		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randle, Goldie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code North Augusta, SC 29860		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randle, Goldie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code North Augusta, SC 29860		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randle, Goldie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code North Augusta, SC 29860		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 525/756 Rpt: 528/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raptopoulos, Deborah <hr/> 6 Contributor address; City; State; Zip Code Boston, MA 02115	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Family therapist		9 Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rastrelli, Bruce <hr/> Contributor address; City; State; Zip Code Salem, OR 97304	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rastrelli, Bruce <hr/> Contributor address; City; State; Zip Code Salem, OR 97304	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ratzlaff, Jane <hr/> Contributor address; City; State; Zip Code Roseburg, OR 97470	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ratzlaff, Jane <hr/> Contributor address; City; State; Zip Code Roseburg, OR 97470	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 526/756 Rpt: 529/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Read, Fred <hr/> 6 Contributor address; City; State; Zip Code Arapahoe, NC 28510	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) none
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Read, Fred <hr/> Contributor address; City; State; Zip Code Arapahoe, NC 28510	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Read, Fred <hr/> Contributor address; City; State; Zip Code Arapahoe, NC 28510	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ream, Amy <hr/> Contributor address; City; State; Zip Code Portland, OR 97225	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ream, Amy <hr/> Contributor address; City; State; Zip Code Portland, OR 97225	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 527/756 Rpt: 530/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reddy, Vijay <hr/> 6 Contributor address; City; State; Zip Code Lake Oswego, OR 97034	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reddy, Vijay <hr/> Contributor address; City; State; Zip Code Lake Oswego, OR 97034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reddy, Vijay <hr/> Contributor address; City; State; Zip Code Lake Oswego, OR 97034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reddy, Vijay <hr/> Contributor address; City; State; Zip Code Lake Oswego, OR 97034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reddy, Vijay <hr/> Contributor address; City; State; Zip Code Lake Oswego, OR 97034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 528/756 Rpt: 531/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reddy, Vijay <hr/> 6 Contributor address; City; State; Zip Code Lake Oswego, OR 97034	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reddy, Vijay <hr/> Contributor address; City; State; Zip Code Lake Oswego, OR 97034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Anne <hr/> Contributor address; City; State; Zip Code Grand Junction, CO 81501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Admin Asst		Employer (See Instructions) Petrol Logic
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Linda <hr/> Contributor address; City; State; Zip Code Ocala, FL 34472	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Support staff		Employer (See Instructions) Macys
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Linda <hr/> Contributor address; City; State; Zip Code Ocala, FL 34472	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Support staff		Employer (See Instructions) Macys

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 529/756 Rpt: 532/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Linda <hr/> 6 Contributor address; City; State; Zip Code Ocala, FL 34472	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Support staff		9 Employer (See Instructions) Macys
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Monroe <hr/> Contributor address; City; State; Zip Code Saint Petersburg, FL 33705	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeder, Marjorie <hr/> Contributor address; City; State; Zip Code Pawnee, OK 74058	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reese, Lenya <hr/> Contributor address; City; State; Zip Code Santa Fe, NM 87505	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) P.A.C.		Employer (See Instructions) self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reiben, Patricia <hr/> Contributor address; City; State; Zip Code New York, NY 10010	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 530/756 Rpt: 533/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reichert, Ann <hr/> 6 Contributor address; City; State; Zip Code Blandford, MA 01008	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) Baystate Noble Hospital
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reichert, Ann <hr/> Contributor address; City; State; Zip Code Blandford, MA 01008	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Baystate Noble Hospital
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reid, Kenneth <hr/> Contributor address; City; State; Zip Code Grosse Pointe Park, MI 48230-1320	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reid, Sara <hr/> Contributor address; City; State; Zip Code Earlington, KY 42410	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reid, Sara <hr/> Contributor address; City; State; Zip Code Earlington, KY 42410	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 531/756 Rpt: 534/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reiff, Patricia <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Rice University
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reiff, Patricia <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Rice University
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reiff, Patricia <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Rice University
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reiman, Susan <hr/> Contributor address; City; State; Zip Code EUGENE, OR 97401	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Retired Self		Employer (See Instructions) Retired Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reiman, Susan <hr/> Contributor address; City; State; Zip Code EUGENE, OR 97401	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired Self		Employer (See Instructions) Retired Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 532/756 Rpt: 535/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reiman, Susan <hr/> 6 Contributor address; City; State; Zip Code EUGENE, OR 97401	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Retired Self		9 Employer (See Instructions) Retired Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reines, Ellen <hr/> Contributor address; City; State; Zip Code Rockville, MD 20852	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reisman, Nikki <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reisman, Nikki <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rendina, Lois <hr/> Contributor address; City; State; Zip Code Tampa, FL 33604	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Moffitt Cancer Center

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 533/756 Rpt: 536/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rene, Daurese <hr/> 6 Contributor address; City; State; Zip Code Santa Clarita, CA 91355	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Resendez, Ray <hr/> Contributor address; City; State; Zip Code Santa Ana, CA 92707	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes-Ferral, Cynthia <hr/> Contributor address; City; State; Zip Code Tampa, FL 33614	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) BayCare
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes-Ferral, Cynthia <hr/> Contributor address; City; State; Zip Code Tampa, FL 33614	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) BayCare
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes-Ferral, Cynthia <hr/> Contributor address; City; State; Zip Code Tampa, FL 33614	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) BayCare

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Charles	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Chesapeake, VA 23321		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Susanna	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Seattle, WA 98118		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Susanna	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Seattle, WA 98118		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynoso, Carmen	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Jenks, OK 74037		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rezabek, Karen	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Columbia, MD 21044		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 535/756 Rpt: 538/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rezzonico, Nilsa <hr/> 6 Contributor address; City; State; Zip Code Orlando, FL 32835	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) buyer		9 Employer (See Instructions) Siemens
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Jean <hr/> Contributor address; City; State; Zip Code York, PA 17404	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Red Lion Schools
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Jean <hr/> Contributor address; City; State; Zip Code York, PA 17404	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Red Lion Schools
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Jean <hr/> Contributor address; City; State; Zip Code York, PA 17404	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Red Lion Schools
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rich, Mona <hr/> Contributor address; City; State; Zip Code Rancho Palos Verdes, CA 90275	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Neighborhood Fam Center

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rich, Mona	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Rancho Palos Verdes, CA 90275		
8 Principal occupation / Job title (See Instructions) Psychotherapist		9 Employer (See Instructions) Neighborhood Fam Center
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richman, Paul	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Boulder, CO 80301		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richmond, Mary	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Newport, RI 02840		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rickmond, James	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Naperville, IL 60540		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rickmond, James	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Naperville, IL 60540		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riedler, Valerie <hr/> 6 Contributor address; City; State; Zip Code Encinitas, CA 92024	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riello, Joe <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89032	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Main
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riepe, James Riepe <hr/> Contributor address; City; State; Zip Code Burbank, CA 91505	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riffaud, Marcelo <hr/> Contributor address; City; State; Zip Code Huntington, NY 11743-1021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riffaud, Marcelo <hr/> Contributor address; City; State; Zip Code Huntington, NY 11743-1021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riffaud, Marcelo	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Huntington, NY 11743-1021		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riffaud, Marcelo	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Huntington, NY 11743-1021		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riggs, Rima	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Port Charlotte, FL 33948		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Joseph	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Suisun City, CA 94585		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Joseph	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Suisun City, CA 94585		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rios, Arturo	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Houston, TX 77005		
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Hauser Clinic
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Risinger, Linda	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Covina, CA 91723		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritenbaugh, Cheryl	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Minneapolis, MN 55419-5256		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritenbaugh, Cheryl	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Minneapolis, MN 55419-5256		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritenbaugh, Cheryl	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Minneapolis, MN 55419-5256		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritenbaugh, Cheryl	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Minneapolis, MN 55419-5256		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritenbaugh, Cheryl	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Minneapolis, MN 55419-5256		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritenbaugh, Cheryl	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Minneapolis, MN 55419-5256		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Joe	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivoira, David	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Knoxville e, TN 37922		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 541/756 Rpt: 544/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rizzo, Maria <hr/> 6 Contributor address; City; State; Zip Code Medford, OR 97504	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robb, Beth W <hr/> Contributor address; City; State; Zip Code Los Gatos, CA 95030	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Beverly <hr/> Contributor address; City; State; Zip Code Prosper, TX 75078	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Beverly <hr/> Contributor address; City; State; Zip Code Prosper, TX 75078	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Carla <hr/> Contributor address; City; State; Zip Code Escondido, CA 92029	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Carla	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Escondido, CA 92029		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Carol	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Lake Forest, CA 92630		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Gloria	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76301		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Richard	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Winston Salem, NC 27104		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Cordelia	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Columbus, OH 43208		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Westwater company

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 543/756 Rpt: 546/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Darlene <hr/> 6 Contributor address; City; State; Zip Code Desoto, TX 75115	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Sandra <hr/> Contributor address; City; State; Zip Code East Point, GA 30344	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodrigues Kaiwa, William <hr/> Contributor address; City; State; Zip Code Lihue, HI 96766	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Daniel <hr/> Contributor address; City; State; Zip Code Floresville, TX 78114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Daniel <hr/> Contributor address; City; State; Zip Code Floresville, TX 78114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Daniel <hr/> 6 Contributor address; City; State; Zip Code Floresville, TX 78114	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Daniel <hr/> Contributor address; City; State; Zip Code Floresville, TX 78114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Daniel <hr/> Contributor address; City; State; Zip Code Floresville, TX 78114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Garth <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Garth <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 545/756 Rpt: 548/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Garth <hr/> 6 Contributor address; City; State; Zip Code Chatsworth, CA 91311	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Garth <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Garth <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Garth <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Garth <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 546/756 Rpt: 549/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Gilberto <hr/> 6 Contributor address; City; State; Zip Code West Palm Beach, FL 33411	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 547/756 Rpt: 550/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> 6 Contributor address; City; State; Zip Code Pasadena, CA 91106	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rachel <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rody, Vivian <hr/> Contributor address; City; State; Zip Code Puyallup, WA 98371	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roebuck, Andrei <hr/> Contributor address; City; State; Zip Code Jordan, NY 13080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roebuck, Andrei <hr/> Contributor address; City; State; Zip Code Jordan, NY 13080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 548/756 Rpt: 551/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Carla	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Chino Valley, AZ 86323		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kim	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code North Sioux City, SD 57049-0517		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rohlfing, Minerva	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Lantana, FL 33462-1875		
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rokoff, Carol	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bethesda, MD 20817		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Gannett Fleming
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rokoff, Carol	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bethesda, MD 20817		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Gannett Fleming

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 549/756 Rpt: 552/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romano, Robert	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Rockville, MD 20850-5955	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romano, Robert	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Rockville, MD 20850-5955	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romano, Robert	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Rockville, MD 20850-5955	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romano, Robert	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Rockville, MD 20850-5955	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romero, Victor	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Santa Maria, CA 93458	
Principal occupation / Job title (See Instructions) Electrician Physical Therapist		Employer (See Instructions) Wicks Solar Inc

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 550/756 Rpt: 553/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rommel, Nancy <hr/> 6 Contributor address; City; State; Zip Code Tucson, AZ 85730	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Nurse practitioner		9 Employer (See Instructions) Self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronning, Thomas <hr/> Contributor address; City; State; Zip Code EAST BETHEL, MN 55011-4758	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roof, Paul <hr/> Contributor address; City; State; Zip Code Renton, WA 98055	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Janette <hr/> Contributor address; City; State; Zip Code Denver, CO 80222	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Admin Secretary		Employer (See Instructions) University of Colorado Hospital
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Janette <hr/> Contributor address; City; State; Zip Code Denver, CO 80222	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Admin Secretary		Employer (See Instructions) University of Colorado Hospital

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 551/756 Rpt: 554/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Janette <hr/> 6 Contributor address; City; State; Zip Code Denver, CO 80222	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Admin Secretary		9 Employer (See Instructions) University of Colorado Hospital
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Linda <hr/> Contributor address; City; State; Zip Code Reno, NV 89509	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) School Nurse		Employer (See Instructions) Washoe County School District
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Linda <hr/> Contributor address; City; State; Zip Code Reno, NV 89509	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) School Nurse		Employer (See Instructions) Washoe County School District
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Howard <hr/> Contributor address; City; State; Zip Code New Albany, OH 43054	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Sherry <hr/> Contributor address; City; State; Zip Code Ventura, CA 93004	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 552/756 Rpt: 555/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenthal, Michael <hr/> 6 Contributor address; City; State; Zip Code Claremont, CA 91711	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenthal, Michael <hr/> Contributor address; City; State; Zip Code Claremont, CA 91711	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenthal, Susan <hr/> Contributor address; City; State; Zip Code Boston, MA 02115	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Alan <hr/> Contributor address; City; State; Zip Code Iowa City, IA 52240	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Iowa
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rostov, Jan <hr/> Contributor address; City; State; Zip Code Kentfield, CA 94904	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 553/756 Rpt: 556/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowland, Judith	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Cuyahoga Falls, OH 44223		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowland, Judith	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Cuyahoga Falls, OH 44223		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowland, Judith	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Cuyahoga Falls, OH 44223		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roy, Carol E	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code West Palm Beach, FL 33409		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roy, Carol E	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code West Palm Beach, FL 33409		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 554/756 Rpt: 557/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roy, Carol E	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code West Palm Beach, FL 33409		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rugar, Lydia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Tucson, AZ 85716		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Tusd
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rusak, Keara	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Oro Valley, AZ 85737		
Principal occupation / Job title (See Instructions) Clinical dietitian		Employer (See Instructions) Hospital
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rusak, Keara	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Oro Valley, AZ 85737		
Principal occupation / Job title (See Instructions) Clinical dietitian		Employer (See Instructions) Hospital
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rush, Earl	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Oakland, CA 94604		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 555/756 Rpt: 558/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rush, Earl	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Oakland, CA 94604		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rush, Earl	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Oakland, CA 94604		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rush, Earl	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Oakland, CA 94604		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rush, Earl	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code Oakland, CA 94604		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutz Susman, Brenda	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Albuquerque, NM 87111		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 556/756 Rpt: 559/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Karen <hr/> 6 Contributor address; City; State; Zip Code Tinley Park, IL 60477	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10028	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10028	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10028	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10028	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 557/756 Rpt: 560/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code NEW YORK, NY 10028		
8 Principal occupation / Job title (See Instructions) Psychotherapist		9 Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NEW YORK, NY 10028		
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code NEW YORK, NY 10028		
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NEW YORK, NY 10028		
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NEW YORK, NY 10028		
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 558/756 Rpt: 561/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10028	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Psychotherapist		9 Employer (See Instructions) Self
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLANGER, CATHARINA <hr/> Contributor address; City; State; Zip Code Jupiter, FL 33477	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARTZ, JILL <hr/> Contributor address; City; State; Zip Code NAPLES, FL 34119	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHORB, ALLISON <hr/> Contributor address; City; State; Zip Code Round Hill, VA 20141	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Cmt		Employer (See Instructions) Self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGSON, EUGENIO <hr/> Contributor address; City; State; Zip Code RONKONKOMA, NY 11779	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 559/756 Rpt: 562/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ALICE <hr/> 6 Contributor address; City; State; Zip Code Windsor Hills, CA 90043	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPORE, DONALD <hr/> Contributor address; City; State; Zip Code WAVERLY, IA 50677-2626	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPORE, DONALD <hr/> Contributor address; City; State; Zip Code WAVERLY, IA 50677-2626	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPORE, DONALD <hr/> Contributor address; City; State; Zip Code WAVERLY, IA 50677-2626	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saari, Karen <hr/> Contributor address; City; State; Zip Code Saint Paul, MN 55127	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 560/756 Rpt: 563/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saari, Karen	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Saint Paul, MN 55127	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saari, Karen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Saint Paul, MN 55127	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saari, Karen	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Saint Paul, MN 55127	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saari, Karen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Saint Paul, MN 55127	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saari, Karen	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code Saint Paul, MN 55127	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 561/756 Rpt: 564/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saari, Karen <hr/> 6 Contributor address; City; State; Zip Code Saint Paul, MN 55127	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saari, Karen <hr/> Contributor address; City; State; Zip Code Saint Paul, MN 55127	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabin, Jonathan <hr/> Contributor address; City; State; Zip Code Iowa City, IA 52240	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Vortex Business Solutions
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sable, Richard <hr/> Contributor address; City; State; Zip Code Rochester, MI 48306	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sacco Jr, Gregory E <hr/> Contributor address; City; State; Zip Code Rumson, NJ 07760	Amount of Contribution (\$) \$51.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 562/756 Rpt: 565/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sacco Jr, Gregory E <hr/> 6 Contributor address; City; State; Zip Code Rumson, NJ 07760	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sacco Jr, Gregory E <hr/> Contributor address; City; State; Zip Code Rumson, NJ 07760	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sachs, Barbara <hr/> Contributor address; City; State; Zip Code Palatine, IL 60074	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saddlemire, Thomas <hr/> Contributor address; City; State; Zip Code Steamboat Springs, CO 80477	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sako, Julie <hr/> Contributor address; City; State; Zip Code Seattle, WA 98178	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Medical Technologist		Employer (See Instructions) UWMC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 563/756 Rpt: 566/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saks, Ronald <hr/> 6 Contributor address; City; State; Zip Code clayton, MO 63105	7 Amount of Contribution (\$) \$36.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas, Teresa <hr/> Contributor address; City; State; Zip Code Oconomowoc, WI 53066	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Senior IT Engineer		Employer (See Instructions) Madison Area Technical College
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salcido, Lisa <hr/> Contributor address; City; State; Zip Code Santa Fe, NM 87505	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Landscape Design		Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saldana, Margaret <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Daycare Provider		Employer (See Instructions) Self
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saldana, Margaret <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Daycare Provider		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 564/756 Rpt: 567/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sallee, Kittie <hr/> 6 Contributor address; City; State; Zip Code Weatherford, TX 76087	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samples, Ron <hr/> Contributor address; City; State; Zip Code Houston, TX 77061	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) College Professor		Employer (See Instructions) Texas Southern University
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Susan <hr/> Contributor address; City; State; Zip Code Allentown, PA 18104	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Susan <hr/> Contributor address; City; State; Zip Code Allentown, PA 18104	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoski, Shamera <hr/> Contributor address; City; State; Zip Code Erie, CO 80516	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Account Management		Employer (See Instructions) Namaste Solar

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 565/756 Rpt: 568/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Sacramento, CA 95834	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanford, Gwendolyn <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Artist/Entertainer		Employer (See Instructions) Gwendolyn Sanford
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santiso, Ann <hr/> Contributor address; City; State; Zip Code Kinnelon, NJ 07405	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santos, Rick <hr/> Contributor address; City; State; Zip Code San Diego, CA 92115	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Contract Analyst		Employer (See Instructions) County of San Diego
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santos, Rick <hr/> Contributor address; City; State; Zip Code San Diego, CA 92115	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Contract Analyst		Employer (See Instructions) County of San Diego

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 566/756 Rpt: 569/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santos, Rick <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92115	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Contract Analyst		9 Employer (See Instructions) County of San Diego
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santos, Rick <hr/> Contributor address; City; State; Zip Code San Diego, CA 92115	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Contract Analyst		Employer (See Instructions) County of San Diego
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saponaro, Carol <hr/> Contributor address; City; State; Zip Code Plantation, FL 33325	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saponaro, Carol <hr/> Contributor address; City; State; Zip Code Plantation, FL 33325	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saponaro, Carol <hr/> Contributor address; City; State; Zip Code Plantation, FL 33325	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 567/756 Rpt: 570/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saponaro, Carol <hr/> 6 Contributor address; City; State; Zip Code Plantation, FL 33325	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saponaro, Carol <hr/> Contributor address; City; State; Zip Code Plantation, FL 33325	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saradpon, Hector <hr/> Contributor address; City; State; Zip Code Sykesville, MD 21784	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Computers		Employer (See Instructions) Govt
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarine, Margaret <hr/> Contributor address; City; State; Zip Code Denton, TX 76207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Respiratory Therapist		Employer (See Instructions) BSWHEALTH
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarine, Margaret <hr/> Contributor address; City; State; Zip Code Denton, TX 76207	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Respiratory Therapist		Employer (See Instructions) BSWHEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 568/756 Rpt: 571/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sasanfar, Guy <hr/> 6 Contributor address; City; State; Zip Code Tallahassee, FL 32312	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sass, Sally <hr/> Contributor address; City; State; Zip Code Ashtabula, OH 44004-2880	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Ashtabula Area City Schools
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sass, Sally <hr/> Contributor address; City; State; Zip Code Ashtabula, OH 44004-2880	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Ashtabula Area City Schools
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sass, Sally <hr/> Contributor address; City; State; Zip Code Ashtabula, OH 44004-2880	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Ashtabula Area City Schools
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Satink, Phyllis <hr/> Contributor address; City; State; Zip Code Underhill, VT 05489	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) APRN		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 569/756 Rpt: 572/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauro, Connie	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Williamstown, WV 26187		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauvageau, Jennifer	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bethel, CT 06801		
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions) Self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Savage, Corinne	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Nashville, TN 37206		
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayers, Thomas	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code Portland, OR 97203		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayles, Leonard	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Philadelphia, PA 19103		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 570/756 Rpt: 573/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scalzo, Susan <hr/> 6 Contributor address; City; State; Zip Code Howell, NJ 07731	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Property Manager		9 Employer (See Instructions) PMA
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scantlebury, Velma <hr/> Contributor address; City; State; Zip Code Newark, DE 19711	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Christiana Care Hospital
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schacter, Barbara <hr/> Contributor address; City; State; Zip Code Pacific Palisades, CA 90272-2328	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schacter, Barbara <hr/> Contributor address; City; State; Zip Code Pacific Palisades, CA 90272-2328	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schacter, Robert <hr/> Contributor address; City; State; Zip Code Hidden Hills, CA 91302	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 571/756 Rpt: 574/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schacter, Robert <hr/> 6 Contributor address; City; State; Zip Code Hidden Hills, CA 91302	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schacter, Robert <hr/> Contributor address; City; State; Zip Code Hidden Hills, CA 91302	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schacter, Robert <hr/> Contributor address; City; State; Zip Code Hidden Hills, CA 91302	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaffer, Cloe <hr/> Contributor address; City; State; Zip Code Windsor, VT 05089	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Landscape garden designer		Employer (See Instructions) Self
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaffer, Cloe <hr/> Contributor address; City; State; Zip Code Windsor, VT 05089	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Landscape garden designer		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 572/756 Rpt: 575/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scharff, Carol	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Larchmont, NY 10538		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schechter, Lawrence	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Henrico, VA 23229		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schechter, Lawrence	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Henrico, VA 23229		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schechter, Lawrence	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Henrico, VA 23229		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schermer, Ron	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Hampton, IA 50441		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 573/756 Rpt: 576/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheyer, Bill <hr/> 6 Contributor address; City; State; Zip Code Union, KY 41091	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schiefer, Judy <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84108	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schiefer, Judy <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84108	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schildge, Jane <hr/> Contributor address; City; State; Zip Code Colts Neck, NJ 07722-1301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) homemaker/volunteer		Employer (See Instructions) not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schipp, Jane <hr/> Contributor address; City; State; Zip Code Santa Claus, IN 47579	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 574/756 Rpt: 577/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlesinger, Jennifer	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Timonium, MD 21093		
8 Principal occupation / Job title (See Instructions) Physical Therapist		9 Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schliessmann, Margaret	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Rafael, CA 94903		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schliessmann, Margaret	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code San Rafael, CA 94903		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schliessmann, Margaret	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code San Rafael, CA 94903		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlitt, William	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Brentwood, CA 94513		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 575/756 Rpt: 578/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlitt, William	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Brentwood, CA 94513		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlitt, William	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brentwood, CA 94513		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlitt, William	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brentwood, CA 94513		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlitt, William	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Brentwood, CA 94513		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlitt, William	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Brentwood, CA 94513		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 576/756 Rpt: 579/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlitt, William <hr/> 6 Contributor address; City; State; Zip Code Brentwood, CA 94513	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlitt, William <hr/> Contributor address; City; State; Zip Code Brentwood, CA 94513	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlitt, William <hr/> Contributor address; City; State; Zip Code Brentwood, CA 94513	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlitt, William <hr/> Contributor address; City; State; Zip Code Brentwood, CA 94513	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlitt, William <hr/> Contributor address; City; State; Zip Code Brentwood, CA 94513	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 577/756 Rpt: 580/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlitt, William	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Brentwood, CA 94513		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlitt, William	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Brentwood, CA 94513		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmetterling, Andrew	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Montclair, NJ 07042		
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmoeckel, Christine	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SACRAMENTO, CA 95834		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schnautz, Liz	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78748		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Austin ISD

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 578/756 Rpt: 581/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schreiner, Peggy <hr/> 6 Contributor address; City; State; Zip Code Bristol, WI 53104	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schreiner, Peggy <hr/> Contributor address; City; State; Zip Code Bristol, WI 53104	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schreiner, Peggy <hr/> Contributor address; City; State; Zip Code Bristol, WI 53104	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schumacher, Maura <hr/> Contributor address; City; State; Zip Code Naples, FL 34109	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schumacher, Maura <hr/> Contributor address; City; State; Zip Code Naples, FL 34109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 579/756 Rpt: 582/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schurr, Lisa <hr/> 6 Contributor address; City; State; Zip Code Sarasota, FL 34242	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, Randall <hr/> Contributor address; City; State; Zip Code sunland, CA 91040-1303	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scoggins, Penny <hr/> Contributor address; City; State; Zip Code Hurdle mills, NC 27541	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Arlene <hr/> Contributor address; City; State; Zip Code Sherwood, AR 72120	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, David <hr/> Contributor address; City; State; Zip Code Santa Cruz, CA 95060	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Software		Employer (See Instructions) Fullpower

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 580/756 Rpt: 583/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Heather <hr/> 6 Contributor address; City; State; Zip Code Eugene, OR 97405	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self/University of Oregon
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Heather <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self/University of Oregon
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Heather <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self/University of Oregon
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Jennifer <hr/> Contributor address; City; State; Zip Code Wilmington, NC 28409	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Shirley <hr/> Contributor address; City; State; Zip Code Maple Grove, MN 55311	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 581/756 Rpt: 584/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seale, Laurel <hr/> 6 Contributor address; City; State; Zip Code Kinde, MI 48445	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seale, Laurel <hr/> Contributor address; City; State; Zip Code Kinde, MI 48445	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sears, Cynthia <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21212	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Johns Hopkins University
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sears, Gerrie <hr/> Contributor address; City; State; Zip Code San Juan Capistrano, CA 92675	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segnitz, Carmen <hr/> Contributor address; City; State; Zip Code Monte Sereno, CA 95030	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired educator		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 582/756 Rpt: 585/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segnitz, Carmen <hr/> 6 Contributor address; City; State; Zip Code Monte Sereno, CA 95030	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired educator		9 Employer (See Instructions) self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segnitz, Carmen <hr/> Contributor address; City; State; Zip Code Monte Sereno, CA 95030	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired educator		Employer (See Instructions) self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seiden, Sherry <hr/> Contributor address; City; State; Zip Code Lenexa, KS 66215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seigler, Jim <hr/> Contributor address; City; State; Zip Code West Columbia, SC 29169	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seraphin, Elizabeth <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90066	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 583/756 Rpt: 586/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sesholtz, Richard <hr/> 6 Contributor address; City; State; Zip Code Boynton Beach, FL 33436-6370	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sethy, Anil <hr/> Contributor address; City; State; Zip Code Issaquah, WA 98027	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seubert, Donald <hr/> Contributor address; City; State; Zip Code Medford, NY 11763	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaffers, Debra <hr/> Contributor address; City; State; Zip Code Baton Rouge, LA 70820	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shama, Amanda <hr/> Contributor address; City; State; Zip Code Tigard, OR 97224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 584/756 Rpt: 587/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shanahan, Linda <hr/> 6 Contributor address; City; State; Zip Code Choctaw, OK 73020	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shanahan, Linda <hr/> Contributor address; City; State; Zip Code Choctaw, OK 73020	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shannon, Linda <hr/> Contributor address; City; State; Zip Code Winter Garden, FL 34787	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharky, Nola <hr/> Contributor address; City; State; Zip Code Baton Rouge, LA 70808	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharms, Dinesh <hr/> Contributor address; City; State; Zip Code Fort Myers, FL 33912	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 585/756 Rpt: 588/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharms, Dinesh <hr/> 6 Contributor address; City; State; Zip Code Fort Myers, FL 33912	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Leonora <hr/> Contributor address; City; State; Zip Code LIVE OAK, TX 78233	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Marilyn <hr/> Contributor address; City; State; Zip Code Kapolei, HI 96707	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheehy, Jim <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90277	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheets, Janet <hr/> Contributor address; City; State; Zip Code St Louis, MO 63129	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 586/756 Rpt: 589/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheets, Janet <hr/> 6 Contributor address; City; State; Zip Code St Louis, MO 63129	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheets, Janet <hr/> Contributor address; City; State; Zip Code St Louis, MO 63129	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheets, Janet <hr/> Contributor address; City; State; Zip Code St Louis, MO 63129	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheets, Janet <hr/> Contributor address; City; State; Zip Code St Louis, MO 63129	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheiniuk, Eileen <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90272	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 587/756 Rpt: 590/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shenny, Phyllis <hr/> 6 Contributor address; City; State; Zip Code Leesburg, VA 20175	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepardson, Rodney <hr/> Contributor address; City; State; Zip Code Nashua, NH 03062	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepherd, Doris <hr/> Contributor address; City; State; Zip Code Liberty Twp, OH 45011	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepherd, Doris <hr/> Contributor address; City; State; Zip Code Liberty Twp, OH 45011	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepherd, Roberta <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 588/756 Rpt: 591/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sher, Mary 6 Contributor address; City; State; Zip Code Alamo, CA 94507	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Artist Agent		9 Employer (See Instructions) Art Licensing Properties LLC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sher, Peter Contributor address; City; State; Zip Code Shoreline, WA 98133	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Perkins Coie LLP
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherburne, Bradford Contributor address; City; State; Zip Code West Hartford, CT 06119	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Hartford Pathology Associates PC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheridan, Pamela Contributor address; City; State; Zip Code Fillmore, CA 93015	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) VCCCD
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherman, Christine Contributor address; City; State; Zip Code Chugiak, AK 99567	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Sp. Ed. Teaching Assistant		Employer (See Instructions) Anchorage School District

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 589/756 Rpt: 592/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherman, Christine 6 Contributor address; City; State; Zip Code Chugiak, AK 99567	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Sp. Ed. Teaching Assistant		9 Employer (See Instructions) Anchorage School District
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shiel-Reardon, Cathy Contributor address; City; State; Zip Code Chicago, IL 60660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shiel-Reardon, Cathy Contributor address; City; State; Zip Code Chicago, IL 60660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shiel-Reardon, Cathy Contributor address; City; State; Zip Code Chicago, IL 60660	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shipp, Robert Contributor address; City; State; Zip Code Lilburn, GA 30047	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 590/756 Rpt: 593/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shortall, Anne <hr/> 6 Contributor address; City; State; Zip Code Richfield, MN 55423	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siefert, Sally <hr/> Contributor address; City; State; Zip Code Sugar Grove, PA 16350	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, Mark <hr/> Contributor address; City; State; Zip Code Redwood City, CA 94061	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, Mark <hr/> Contributor address; City; State; Zip Code Redwood City, CA 94061	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, lois <hr/> Contributor address; City; State; Zip Code Latham, NY 12110	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 591/756 Rpt: 594/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silva, Joseph 6 Contributor address; City; State; Zip Code Marlborough, CT 06447	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmon, Vincent Contributor address; City; State; Zip Code Newport Coast, CA 92657	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Audrey Contributor address; City; State; Zip Code Laurelton, NY 11413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) none
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Michael Contributor address; City; State; Zip Code Hillsboro, OR 97124	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Michael Contributor address; City; State; Zip Code Hillsboro, OR 97124-4054	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 592/756 Rpt: 595/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Michael	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Hillsboro, OR 97124		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Michael	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Hillsboro, OR 97124		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Bonnie	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Fresno, CA 93730		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Cynthia	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Portland, OR 97206		
Principal occupation / Job title (See Instructions) HR Director		Employer (See Instructions) Northwest Children's Theater
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims, Ron	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Graham, TX 76450		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 593/756 Rpt: 596/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims, Ronald <hr/> 6 Contributor address; City; State; Zip Code Graham, TX 76450	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims, Ronald <hr/> Contributor address; City; State; Zip Code Graham, TX 76450	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinclair, Miryam <hr/> Contributor address; City; State; Zip Code Hurley, NY 12443	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sindler, Susan <hr/> Contributor address; City; State; Zip Code McHenry, IL 60051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sindler, Susan <hr/> Contributor address; City; State; Zip Code McHenry, IL 60051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 594/756 Rpt: 597/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sindler, Susan <hr/> 6 Contributor address; City; State; Zip Code McHenry, IL 60051	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sindler, Susan <hr/> Contributor address; City; State; Zip Code McHenry, IL 60051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siracusa, Luly <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siracusa, Luly <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skigen, Patricia <hr/> Contributor address; City; State; Zip Code Chicago, IL 60602	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 595/756 Rpt: 598/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skigen, Patricia <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60602	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, José <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, José <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skirvin, Weldon J <hr/> Contributor address; City; State; Zip Code Seattle, WA 98119-5806	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slade, Grant <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87104	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 596/756 Rpt: 599/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slade, Grant <hr/> 6 Contributor address; City; State; Zip Code Albuquerque, NM 87104	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slagle, Martha <hr/> Contributor address; City; State; Zip Code Sherman, TX 75092	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slagle, Martha <hr/> Contributor address; City; State; Zip Code Sherman, TX 75092	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slavin, Virginia <hr/> Contributor address; City; State; Zip Code Haslet, TX 76052	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Data analyst		Employer (See Instructions) Peraton
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloan, Ania <hr/> Contributor address; City; State; Zip Code Seffner, FL 33584	Amount of Contribution (\$) \$4.70
Principal occupation / Job title (See Instructions) Sales Agent		Employer (See Instructions) Airlines

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 597/756 Rpt: 600/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloan, Ania <hr/> 6 Contributor address; City; State; Zip Code Seffner, FL 33584	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Sales Agent		9 Employer (See Instructions) Airlines
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smallwood, Deborah <hr/> Contributor address; City; State; Zip Code The Plains, VA 20198	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Aesthetics Academy of Virginia
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Barbara <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78467	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Debra <hr/> Contributor address; City; State; Zip Code Laguna Niguel, CA 92677	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Joseph <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21217	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) State of Maryland

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 598/756 Rpt: 601/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Justin <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77006	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) graphic designer		9 Employer (See Instructions) Houston Chronicle
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kimberly <hr/> Contributor address; City; State; Zip Code Fair Oaks, CA 95628	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kimberly <hr/> Contributor address; City; State; Zip Code Fair Oaks, CA 95628	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kimberly <hr/> Contributor address; City; State; Zip Code Fair Oaks, CA 95628	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kimberly <hr/> Contributor address; City; State; Zip Code Fair Oaks, CA 95628	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 599/756 Rpt: 602/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kimberly <hr/> 6 Contributor address; City; State; Zip Code Fair Oaks, CA 95628	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kimberly <hr/> Contributor address; City; State; Zip Code Fair Oaks, CA 95628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kimberly <hr/> Contributor address; City; State; Zip Code Fair Oaks, CA 95628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kimberly <hr/> Contributor address; City; State; Zip Code Fair Oaks, CA 95628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kimberly <hr/> Contributor address; City; State; Zip Code Fair Oaks, CA 95628	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 600/756 Rpt: 603/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kimberly <hr/> 6 Contributor address; City; State; Zip Code Fair Oaks, CA 95628	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kimberly <hr/> Contributor address; City; State; Zip Code Fair Oaks, CA 95628	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Paul E <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37422	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Paul E <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37412	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Rebecca <hr/> Contributor address; City; State; Zip Code Crozet, VA 22932	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Sales assistant		Employer (See Instructions) Greenwood Homes

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 601/756 Rpt: 604/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith Hill you, Dolly <hr/> 6 Contributor address; City; State; Zip Code Cleveland Heights, OH 44112	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith Jr., J. Alfred <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95835	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith-Campbell, Steven <hr/> Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith-Campbell, Steven <hr/> Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smoller, Evan <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 91403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Management Analyst		Employer (See Instructions) LA City

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 602/756 Rpt: 605/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snead, Dona <hr/> 6 Contributor address; City; State; Zip Code Lawrence, KS 66044	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snelson, Richard and Madonna <hr/> Contributor address; City; State; Zip Code Broken Arrow, OK 74011	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snelson, Richard and Madonna <hr/> Contributor address; City; State; Zip Code Broken Arrow, OK 74011	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snelson, Richard and Madonna <hr/> Contributor address; City; State; Zip Code Broken Arrow, OK 74011	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snipes, John <hr/> Contributor address; City; State; Zip Code Pelzer, SC 29669	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 603/756 Rpt: 606/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snipes, John	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pelzer, SC 29669		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snipes, John	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pelzer, SC 29669		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snoen, Gayle	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Vancouver, WA 98682		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snoen, Gayle	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Vancouver, WA 98682		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snoen, Gayle	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Vancouver, WA 98682		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 604/756 Rpt: 607/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snoen, Gayle	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Vancouver, WA 98682		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snoen, Gayle	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Vancouver, WA 98682		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Bob	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Washington, DC 20002-6022		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Bob	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Washington, DC 20002-6022		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Liana	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Las Vegas, NV 89135-7810		
Principal occupation / Job title (See Instructions) Marriage and Family Therapist		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 605/756 Rpt: 608/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sohl, Marty <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76112	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solomon Albert, Evelyn <hr/> Contributor address; City; State; Zip Code Oklahoma City, OK 73130	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Somerville, Tammy <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28277	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Crna		Employer (See Instructions) Atrium health
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sonn, Donna <hr/> Contributor address; City; State; Zip Code Lakeport, CA 95453	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sonn, Donna <hr/> Contributor address; City; State; Zip Code Lakeport, CA 95453	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 606/756 Rpt: 609/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sonn, Donna <hr/> 6 Contributor address; City; State; Zip Code Lakeport, CA 95453	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorden, Nancy <hr/> Contributor address; City; State; Zip Code Kensington, MD 20895	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Biologist		Employer (See Instructions) NIH
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorense, Donald <hr/> Contributor address; City; State; Zip Code Sequim, WA 98382	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorrento, Bette <hr/> Contributor address; City; State; Zip Code Lawrenceville, NJ 08648	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southern, Tom <hr/> Contributor address; City; State; Zip Code San Clemente, CA 92672	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Boat captain		Employer (See Instructions) Dolphin safari

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 607/756 Rpt: 610/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soward, Mark C. <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spater-Zimmerman, Susan <hr/> Contributor address; City; State; Zip Code Larchmont, NY 10538	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spaulding, Doris <hr/> Contributor address; City; State; Zip Code Saginaw, MI 48638	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, John <hr/> Contributor address; City; State; Zip Code Lees Summit, MO 64081	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Marie <hr/> Contributor address; City; State; Zip Code Somersworth, NH 03878	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 608/756 Rpt: 611/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Sharon <hr/> 6 Contributor address; City; State; Zip Code Chapel Hill, NC 27516	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Wesley A <hr/> Contributor address; City; State; Zip Code Potomac, MD 20859	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Wesley A <hr/> Contributor address; City; State; Zip Code Potomac, MD 20859	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sperber, Damon <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94114	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Associate Director		Employer (See Instructions) AAU
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sperber, Damon <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94114	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Associate Director		Employer (See Instructions) AAU

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 609/756 Rpt: 612/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spilman, James <hr/> 6 Contributor address; City; State; Zip Code Richmond, CA 94804	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) none
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spoto, Peter <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90032	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Wine Sommelier		Employer (See Instructions) Mission Wine & Spirits
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spoto, Peter <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90032	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Wine Sommelier		Employer (See Instructions) Mission Wine & Spirits
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprague, Glenna <hr/> Contributor address; City; State; Zip Code Chassell, MI 49916	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Springer, Gary <hr/> Contributor address; City; State; Zip Code Farmers Branch, TX 75244	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 610/756 Rpt: 613/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurrier, Sharon <hr/> 6 Contributor address; City; State; Zip Code Kansas City, MO 64118	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stacy, Rebecca <hr/> Contributor address; City; State; Zip Code Marietta, SC 29661	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Ecommerce		Employer (See Instructions) Stacy Enterprises
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, Theodore <hr/> Contributor address; City; State; Zip Code Prescott Valley, AZ 86315	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, Theodore <hr/> Contributor address; City; State; Zip Code Prescott Valley, AZ 86315	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, Theodore <hr/> Contributor address; City; State; Zip Code Prescott Valley, AZ 86315	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NONE

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 611/756 Rpt: 614/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, Theodore 6 Contributor address; City; State; Zip Code Prescott Valley, AZ 86315	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, Theodore Contributor address; City; State; Zip Code Prescott Valley, AZ 86315	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, Theodore Contributor address; City; State; Zip Code Prescott Valley, AZ 86315	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NONE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, Theodore Contributor address; City; State; Zip Code Prescott Valley, AZ 86315	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NONE
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, Theodore Contributor address; City; State; Zip Code Prescott Valley, AZ 86315	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NONE

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, Theodore	7 Amount of Contribution (\$) \$9.00
6 Contributor address; City; State; Zip Code Prescott Valley, AZ 86315		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NONE
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, Theodore	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Prescott Valley, AZ 86315		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NONE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, Theodore	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Prescott Valley, AZ 86315		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NONE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, Theodore	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Prescott Valley, AZ 86315		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NONE
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, Theodore	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Prescott Valley, AZ 86315		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NONE

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 613/756 Rpt: 616/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, Theodore	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Prescott Valley, AZ 86315		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NONE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stamnes, Knut	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Hoboken, NJ 07030		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Stevens Institute of Technology
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stamnes, Knut	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Hoboken, NJ 07030		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Stevens Institute of Technology
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Brooke	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Astoria, OR 97103		
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions) Providence
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Starr, Mark	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Poinciana, FL 34759		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Starr, Mark	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code Poinciana, FL 34759		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stavish, Paul	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Havertown, PA 19083		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stavish, Paul	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Havertown, PA 19083		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stavish, Paul	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code Havertown, PA 19083		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stavish, Paul	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Havertown, PA 19083		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 615/756 Rpt: 618/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stavish, Paul <hr/> 6 Contributor address; City; State; Zip Code Havertown, PA 19083	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Linda <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Linda <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steenhoff, Linda <hr/> Contributor address; City; State; Zip Code Cutler Bay, FL 33157	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stefanucci, James <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90036	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 616/756 Rpt: 619/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stefanucci, James <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90036	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steinacker, Martha <hr/> Contributor address; City; State; Zip Code Tempe, AZ 85282	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Instructional designer		Employer (See Instructions) Arizona State University
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steinbecker, Ronald <hr/> Contributor address; City; State; Zip Code Saint Louis, MO 63116	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steinbecker, Ronald <hr/> Contributor address; City; State; Zip Code Saint Louis, MO 63116	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steinbecker, Ronald <hr/> Contributor address; City; State; Zip Code Saint Louis, MO 63116	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 617/756 Rpt: 620/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steinbecker, Ronald <hr/> 6 Contributor address; City; State; Zip Code Saint Louis, MO 63116	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stem, Randall <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions) self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stem, Randall <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions) self
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Melissa <hr/> Contributor address; City; State; Zip Code San Diego, CA 92109	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Melissa <hr/> Contributor address; City; State; Zip Code San Diego, CA 92109	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 618/756 Rpt: 621/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Melissa	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code San Diego, CA 92109		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson, Gwen	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Baton Rouge, LA 70805		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson, Gwen	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Baton Rouge, LA 70805		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson, John	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Catonsville, MD 21228		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Carroll County Public Schools
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson, Robert	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code new york, NY 10075-1687		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 619/756 Rpt: 622/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson, Robert <hr/> 6 Contributor address; City; State; Zip Code new york, NY 10075-1687	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steward, Sheila <hr/> Contributor address; City; State; Zip Code Powder Springs, GA 30127	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steward, Sheila <hr/> Contributor address; City; State; Zip Code Powder Springs, GA 30127	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Wiley <hr/> Contributor address; City; State; Zip Code Bellingham, WA 98229	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart-Bey, Robin <hr/> Contributor address; City; State; Zip Code Randallstown, MD 21133	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Educational Specialist II		Employer (See Instructions) Baltimore City Public Schools

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 620/756 Rpt: 623/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stocke, Lori <hr/> 6 Contributor address; City; State; Zip Code Sparks, NV 89434	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) It		9 Employer (See Instructions) Hyatt
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stocke, Lori <hr/> Contributor address; City; State; Zip Code Sparks, NV 89434	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) It		Employer (See Instructions) Hyatt
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stocke, Lori <hr/> Contributor address; City; State; Zip Code Sparks, NV 89434	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) It		Employer (See Instructions) Hyatt
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stocke, Lori <hr/> Contributor address; City; State; Zip Code Sparks, NV 89434	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) It		Employer (See Instructions) Hyatt
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stocke, Lori <hr/> Contributor address; City; State; Zip Code Sparks, NV 89434	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) It		Employer (See Instructions) Hyatt

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 621/756 Rpt: 624/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes, Josephine <hr/> 6 Contributor address; City; State; Zip Code PINEHURST, NC 28374-7037	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Lisa <hr/> Contributor address; City; State; Zip Code Boynton Beach, FL 33437	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Personal Assistant		Employer (See Instructions) Aspamia
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone Belic, Ellen <hr/> Contributor address; City; State; Zip Code Chicago, IL 60614	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Storey, Dianna <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95865	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Storey, Dianna <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95865	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 622/756 Rpt: 625/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stout, Russell Eugene <hr/> 6 Contributor address; City; State; Zip Code Burien, WA 98166-2543	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Associate		9 Employer (See Instructions) The Home Depot
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stout, Russell Eugene <hr/> Contributor address; City; State; Zip Code Burien, WA 98166-2543	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) The Home Depot
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strand Patterson, Valerie <hr/> Contributor address; City; State; Zip Code plymouth, MN 55447	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) pastor		Employer (See Instructions) St. Philip the Deacon Lutheran Church
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Streeter, Rhoden <hr/> Contributor address; City; State; Zip Code Louisville, NY 40205-1816	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stringer, Donna <hr/> Contributor address; City; State; Zip Code Canandaigua, NY 14424	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 623/756 Rpt: 626/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stringer, Donna <hr/> 6 Contributor address; City; State; Zip Code Canandaigua, NY 14424	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stringer, Donna <hr/> Contributor address; City; State; Zip Code Canandaigua, NY 14424	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strouse, William <hr/> Contributor address; City; State; Zip Code Kirkland, WA 98033	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) W strouse
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strouse, William <hr/> Contributor address; City; State; Zip Code Kirkland, WA 98033	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) W strouse
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Struckman, Heather <hr/> Contributor address; City; State; Zip Code Arlington, WA 98223	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 624/756 Rpt: 627/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strumpfer, Warren E <hr/> 6 Contributor address; City; State; Zip Code Blackwood, NJ 08012	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Struthers, Daryl <hr/> Contributor address; City; State; Zip Code Bellingham, WA 98229	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Struve, David <hr/> Contributor address; City; State; Zip Code Loleta, CA 95551	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Succio, Sue <hr/> Contributor address; City; State; Zip Code Chisholm, MN 55719	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suchmann, Kate <hr/> Contributor address; City; State; Zip Code Springfield, VT 05156	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Vermont Technical College

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 625/756 Rpt: 628/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sundock, Barbara	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Nashville, TN 37221		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sundock, Barbara	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Nashville, TN 37221		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surber, Margy Lynn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Newport News, VA 23606		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surber, Margy Lynn	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Newport News, VA 23606		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surber, Margy Lynn	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Newport News, VA 23606		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 626/756 Rpt: 629/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutherland, Anne <hr/> 6 Contributor address; City; State; Zip Code Fort Collins, CO 80526	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutherland, Shelby B <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37416	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Admin Asst		Employer (See Instructions) TVA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutherland, Shelby B <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37416	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Admin Asst		Employer (See Instructions) TVA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutherland, Shelby B <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37416	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Admin Asst		Employer (See Instructions) TVA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutherland, Shelby B <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37416	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Admin Asst		Employer (See Instructions) TVA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 627/756 Rpt: 630/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Kitty <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97220	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweet, Carl <hr/> Contributor address; City; State; Zip Code Peru, IN 46970	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweet, Carl <hr/> Contributor address; City; State; Zip Code Peru, IN 46970	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweet, Carl <hr/> Contributor address; City; State; Zip Code Peru, IN 46970	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweet, Carl <hr/> Contributor address; City; State; Zip Code Peru, IN 46970	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 628/756 Rpt: 631/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweet, Carl <hr/> 6 Contributor address; City; State; Zip Code Peru, IN 46970	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweigert, Anita <hr/> Contributor address; City; State; Zip Code Boonsboro, MD 21713	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweigert, Anita <hr/> Contributor address; City; State; Zip Code Boonsboro, MD 21713	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swenson, Deb <hr/> Contributor address; City; State; Zip Code Bend, OR 97702	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swenson, Deb <hr/> Contributor address; City; State; Zip Code Bend, OR 97702	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 629/756 Rpt: 632/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swyers, Richard 6 Contributor address; City; State; Zip Code Richmond, VA 23221	7 Amount of Contribution (\$) \$17.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swyers, Richard Contributor address; City; State; Zip Code Richmond, VA 23221	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swyers, Richard Contributor address; City; State; Zip Code Richmond, VA 23221	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swyers, Richard Contributor address; City; State; Zip Code Richmond, VA 23221	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swyers, Richard Contributor address; City; State; Zip Code Richmond, VA 23221	Amount of Contribution (\$) \$37.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 630/756 Rpt: 633/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swyers, Richard	7 Amount of Contribution (\$) \$37.00
6 Contributor address; City; State; Zip Code Richmond, VA 23221		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swyers, Richard	Amount of Contribution (\$) \$47.00
Contributor address; City; State; Zip Code Richmond, VA 23221		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swyers, Richard	Amount of Contribution (\$) \$59.00
Contributor address; City; State; Zip Code Richmond, VA 23221		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swyers, Richard	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Richmond, VA 23221		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swyers, Richard	Amount of Contribution (\$) \$42.00
Contributor address; City; State; Zip Code Richmond, VA 23221		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 631/756 Rpt: 634/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swyers, Richard <hr/> 6 Contributor address; City; State; Zip Code Richmond, VA 23221	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swyers, Richard <hr/> Contributor address; City; State; Zip Code Richmond, VA 23221	Amount of Contribution (\$) \$37.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sykes, Karen <hr/> Contributor address; City; State; Zip Code Folsom, CA 95630	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sykes, Karen <hr/> Contributor address; City; State; Zip Code Folsom, CA 95630	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Szott, Lynne <hr/> Contributor address; City; State; Zip Code Port Saint Lucie, FL 34952	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RN Case manager		Employer (See Instructions) CSL

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 632/756 Rpt: 635/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Szurek, Kate <hr/> 6 Contributor address; City; State; Zip Code La Conner, WA 98257	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) Skagit Law Group PLLC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATUM, PAIGE <hr/> Contributor address; City; State; Zip Code Slidell, LA 70461	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLESON, WILDA W <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-5732	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLESON, WILDA W <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-5732	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLESON, WILDA W <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-5732	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 633/756 Rpt: 636/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLESON, WILDA W <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640-5732	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabatabaie, Tara <hr/> Contributor address; City; State; Zip Code Oklahoma City, OK 73162	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Sill Law Group
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabatabaie, Tara <hr/> Contributor address; City; State; Zip Code Oklahoma City, OK 73162	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Sill Law Group
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabatabaie, Tara <hr/> Contributor address; City; State; Zip Code Oklahoma City, OK 73162	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Sill Law Group
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taggart, Walter <hr/> Contributor address; City; State; Zip Code Villanova, PA 19085	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 634/756 Rpt: 637/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tallman, Curtis <hr/> 6 Contributor address; City; State; Zip Code Linden, NJ 07036	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talmage, David <hr/> Contributor address; City; State; Zip Code Covington, LA 70433	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) clinical social worker		Employer (See Instructions) self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tatak, Patricia <hr/> Contributor address; City; State; Zip Code Northbrook, IL 60062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tate, Arthur <hr/> Contributor address; City; State; Zip Code Crossville, TN 38555	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tate, Jacqueline <hr/> Contributor address; City; State; Zip Code Portland, OR 97213	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) program specialist		Employer (See Instructions) Multnomah County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 635/756 Rpt: 638/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tatum, Ed	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Clovis, NM 88101		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tatum, Ed	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Clovis, NM 88101		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tatum, Ed	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Clovis, NM 88101		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tatum, Ed	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Clovis, NM 88101		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Donna	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Austin, TX 78729		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 636/756 Rpt: 639/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Grace	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Fresno, CA 93710		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Steven	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Roanoke, VA 24015		
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Radford University
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tays, Wilma M Tays	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Portage, MI 49024		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tebo, Robert	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code La Mesa, CA 91941		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tebo, Robert	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code La Mesa, CA 91941		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 637/756 Rpt: 640/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tebo, Robert	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code La Mesa, CA 91941	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tebo, Robert	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code La Mesa, CA 91941	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tebo, Robert	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code La Mesa, CA 91941	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tebo, Robert	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code La Mesa, CA 91941	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tecca, Jo H	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Livingston, MT 59047	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 638/756 Rpt: 641/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Telford, Elinor <hr/> 6 Contributor address; City; State; Zip Code Miami, FL 33176	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Telford, Elinor <hr/> Contributor address; City; State; Zip Code Miami, FL 33176	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teller, Nancy <hr/> Contributor address; City; State; Zip Code Newnan, GA 30263	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tellez, Paul <hr/> Contributor address; City; State; Zip Code El Paso, TX 79932	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Ruhmann Law Firm
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tellez, Paul <hr/> Contributor address; City; State; Zip Code El Paso, TX 79932	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Ruhmann Law Firm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 639/756 Rpt: 642/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tellez, Paul <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79932	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Ruhmann Law Firm
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templeman, Roberta <hr/> Contributor address; City; State; Zip Code Newport, VT 05855	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templeman, Roberta <hr/> Contributor address; City; State; Zip Code Newport, VT 05855	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templeman, Roberta <hr/> Contributor address; City; State; Zip Code Newport, VT 05855	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templeman, Roberta <hr/> Contributor address; City; State; Zip Code Newport, VT 05855	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 640/756 Rpt: 643/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Temples, Patty R	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Gibsonville, NC 27249		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Temples, Patty R	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Gibsonville, NC 27249		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Temples, Patty R	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Gibsonville, NC 27249		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Temples, Patty R	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Gibsonville, NC 27249		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terrell, Shirl	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Dallas, TX 75214		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 641/756 Rpt: 644/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Leslie <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94112	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thames, Marshall <hr/> Contributor address; City; State; Zip Code Puyallup, WA 98375	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Mechanic		Employer (See Instructions) Boeing Company
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thames, Marshall <hr/> Contributor address; City; State; Zip Code Puyallup, WA 98375	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Mechanic		Employer (See Instructions) Boeing
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Therrien, Rachelle <hr/> Contributor address; City; State; Zip Code Biddeford, ME 04005	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Barbara <hr/> Contributor address; City; State; Zip Code Birmingham, AL 35234	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 642/756 Rpt: 645/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Darlene <hr/> 6 Contributor address; City; State; Zip Code Seguin, TX 78155	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Darlene <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Darlene <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Donald <hr/> Contributor address; City; State; Zip Code Ventura, CA 93003	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Sara <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97330	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Clinical Nutrition Manager		Employer (See Instructions) Sodexo

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 643/756 Rpt: 646/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Shirley <hr/> 6 Contributor address; City; State; Zip Code Columbia, MD 21045	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Suzanne <hr/> Contributor address; City; State; Zip Code West Bloomfield Township, MI 48323	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Psychoanalyst		Employer (See Instructions) Self
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Suzanne <hr/> Contributor address; City; State; Zip Code West Bloomfield Township, MI 48323	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Psychoanalyst		Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Suzanne <hr/> Contributor address; City; State; Zip Code West Bloomfield Township, MI 48323	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Psychoanalyst		Employer (See Instructions) Self
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Suzanne <hr/> Contributor address; City; State; Zip Code West Bloomfield Township, MI 48323	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Psychoanalyst		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 644/756 Rpt: 647/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Suzanne	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code West Bloomfield Township, MI 48323		
8 Principal occupation / Job title (See Instructions) Psychoanalyst		9 Employer (See Instructions) Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Tammie	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Lovejoy, GA 30250		
Principal occupation / Job title (See Instructions) Events Coordinator		Employer (See Instructions) City of Riverdale
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Tammie	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Lovejoy, GA 30250		
Principal occupation / Job title (See Instructions) Events Coordinator		Employer (See Instructions) City of Riverdale
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Carmella	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Indian Head, MD 20640		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Teledyne FLIR
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Cheryl	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Orlando, FL 32825		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 645/756 Rpt: 648/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Jerri <hr/> 6 Contributor address; City; State; Zip Code Tempe, AZ 85284	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Jerry <hr/> Contributor address; City; State; Zip Code Bedford, TX 76022	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Jerry <hr/> Contributor address; City; State; Zip Code Bedford, TX 76022	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Jerry <hr/> Contributor address; City; State; Zip Code Bedford, TX 76022	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Jerry <hr/> Contributor address; City; State; Zip Code Bedford, TX 76022	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 646/756 Rpt: 649/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Jerry	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Bedford, TX 76022		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Jerry	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Bedford, TX 76022		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ronda	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Jefferson City, MO 65109		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomsen, Cynthia	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Ormond Beach, FL 32174		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, Jan	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Rancho Palos Verdes, CA 90275-4422		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 647/756 Rpt: 650/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Worley <hr/> 6 Contributor address; City; State; Zip Code Sherman Oaks, CA 91403	7 Amount of Contribution (\$) \$14.00
8 Principal occupation / Job title (See Instructions) Professor of English		9 Employer (See Instructions) Los Angeles Valley College
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Worley <hr/> Contributor address; City; State; Zip Code Sherman Oaks, CA 91403	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Professor of English		Employer (See Instructions) Los Angeles Valley College
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thurman, Kathie <hr/> Contributor address; City; State; Zip Code Brentwood, TN 37027	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thurman, Kathie <hr/> Contributor address; City; State; Zip Code Brentwood, TN 37027	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thurman, Susan <hr/> Contributor address; City; State; Zip Code Jackson, MI 49203	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 648/756 Rpt: 651/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiemens, Jim <hr/> 6 Contributor address; City; State; Zip Code Laguna Niguel, CA 92677	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Machinist		9 Employer (See Instructions) Desco
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timbers-Hjermstad, Sheila <hr/> Contributor address; City; State; Zip Code Champlin, MN 55316	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Small business owners		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tirrell-Wysocki, Sarah <hr/> Contributor address; City; State; Zip Code Canterbury, NH 03224	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tirrell-Wysocki, Sarah <hr/> Contributor address; City; State; Zip Code Canterbury, NH 03224	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tirrell-Wysocki, Sarah <hr/> Contributor address; City; State; Zip Code Canterbury, NH 03224	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 649/756 Rpt: 652/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tirrell-Wysocki, Sarah <hr/> 6 Contributor address; City; State; Zip Code Canterbury, NH 03224	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tirrell-Wysocki, Sarah <hr/> Contributor address; City; State; Zip Code Canterbury, NH 03224	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tirrell-Wysocki, Sarah <hr/> Contributor address; City; State; Zip Code Canterbury, NH 03224	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tirrell-Wysocki, Sarah <hr/> Contributor address; City; State; Zip Code Canterbury, NH 03224	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tobey, Virginia <hr/> Contributor address; City; State; Zip Code Alameda, CA 94501	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 650/756 Rpt: 653/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tobey, Virginia	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Alameda, CA 94501		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tobey, Virginia	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Alameda, CA 94501		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tobias, Gloria	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Reading, PA 19605		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, Jennifer	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Savannah, GA 31401		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomczyk Sr, Edward	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Vestal, NY 13850-3303		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 651/756 Rpt: 654/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toohey, Cindy	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Santa Barbara, CA 93103	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Sally	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code San Francisco, CA 94122	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Sally	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code San Francisco, CA 94122	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Sally	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Francisco, CA 94122	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Sally	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code San Francisco, CA 94122	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 652/756 Rpt: 655/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Sally	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code San Francisco, CA 94122		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tousignant, Richard	Amount of Contribution (\$) \$5.09
Contributor address; City; State; Zip Code Plymouth, MN 55441		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tousignant, Richard	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Plymouth, MN 55441		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tout, Ann	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Hopkins, MN 55305		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tout, Ann	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Hopkins, MN 55305		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 653/756 Rpt: 656/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Towne, Virginia	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Newport Beach, CA 92660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Towne, Virginia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Newport Beach, CA 92660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Towne, Virginia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Newport Beach, CA 92660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Towne, Virginia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Newport Beach, CA 92660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trautwein, Richard	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pequannick, NJ 07440-1122		
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 654/756 Rpt: 657/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trester, Angela <hr/> 6 Contributor address; City; State; Zip Code Saugatuck, MI 39453	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) Bronson
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trinka, Carrie <hr/> Contributor address; City; State; Zip Code Fayetteville, AR 72701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trinka, Carrie <hr/> Contributor address; City; State; Zip Code Fayetteville, AR 72701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trinka, Carrie <hr/> Contributor address; City; State; Zip Code Fayetteville, AR 72701	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trinka, Carrie <hr/> Contributor address; City; State; Zip Code Fayetteville, AR 72701	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 655/756 Rpt: 658/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trinka, Carrie <hr/> 6 Contributor address; City; State; Zip Code Fayetteville, AR 72701	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troll, Sharon <hr/> Contributor address; City; State; Zip Code Big Creek, CA 93605	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troutt, James <hr/> Contributor address; City; State; Zip Code Spokane, WA 99224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troy, Danielle <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trujillo, Eddie <hr/> Contributor address; City; State; Zip Code Montebello, CA 90640	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 656/756 Rpt: 659/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trujillo, Eddie <hr/> 6 Contributor address; City; State; Zip Code Montebello, CA 90640	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tubby, Gary <hr/> Contributor address; City; State; Zip Code Avon Park, FL 33825	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) disabled 73 yr. old marine combat veteran		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tubby, Gary <hr/> Contributor address; City; State; Zip Code Avon Park, FL 33825	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) disabled 73 yr. old marine combat veteran		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tueche, Jane <hr/> Contributor address; City; State; Zip Code Oak Park, IL 60302	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) sales manager		Employer (See Instructions) thermo fisher scientific
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tulloch, Barbara <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Administrative Officer		Employer (See Instructions) DHHS/IHS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 657/756 Rpt: 660/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turriff, Linda <hr/> 6 Contributor address; City; State; Zip Code De Pere, WI 54115	7 Amount of Contribution (\$) \$10.50
8 Principal occupation / Job title (See Instructions) Receptionist		9 Employer (See Instructions) Executive Office Suites
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turriff, Linda <hr/> Contributor address; City; State; Zip Code De Pere, WI 54115	Amount of Contribution (\$) \$15.50
Principal occupation / Job title (See Instructions) Receptionist		Employer (See Instructions) Executive Office Suites
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULLRICH, DAVID <hr/> Contributor address; City; State; Zip Code Friendship, WI 53934	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Uhl, Amy <hr/> Contributor address; City; State; Zip Code Savannah, GA 31410	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Pet care professional		Employer (See Instructions) Pooches & Paws Petcare LLC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ujka, Barbara <hr/> Contributor address; City; State; Zip Code Liberty, MO 64068	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 658/756 Rpt: 661/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ulett, Ann	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Hartville, MO 65667		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ulrickson, Susan	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Seattle, WA 98148		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urban, David	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Seattle, WA 98121		
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urias, Viola	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Round Rock, TX 78664		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urias, Viola	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Round Rock, TX 78664		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 659/756 Rpt: 662/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urias, Viola <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78664	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urias, Viola <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urias, Viola <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urias, Viola <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdes, Rosalinda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78223	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 660/756 Rpt: 663/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenti, Anna <hr/> 6 Contributor address; City; State; Zip Code Surprise, AZ 85388	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Social Worker		9 Employer (See Instructions) self-employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenti, Anna <hr/> Contributor address; City; State; Zip Code Surprise, AZ 85388	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) self-employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Alexandria <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28203	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Contract work		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Alexandria <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28203	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Contract work		Employer (See Instructions) Self
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vallejos, Eduardo <hr/> Contributor address; City; State; Zip Code Chicago, IL 60660-3838	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 661/756 Rpt: 664/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vallejos, Eduardo	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Chicago, IL 60660-3838		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van De Rostyne, Julia	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Louisville, KY 40205		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Roekel, Teresa	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Plano, IA 52581		
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions) Usps
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanHorn Jr, William	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Pipersville, PA 18947		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanHorn Jr, William	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Pipersville, PA 18947		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 662/756 Rpt: 665/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanHorn Jr, William	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Pipersville, PA 18947		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/a
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanHorn Jr, William	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Pipersville, PA 18947		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/a
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanTuyl, Tamara	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code WALNUT CREEK, CA 94597		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanTuyl, Tamara	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code WALNUT CREEK, CA 94597		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanTuyl, Tamara	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code WALNUT CREEK, CA 94597		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 663/756 Rpt: 666/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vance, Connie	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Bloomfield, IN 47424		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vance, David	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Minneapolis, NC 28652		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vance, Michael	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Naples, FL 34108		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderdoes, James	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Marana, AZ 85658		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderdoes, James	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Marana, AZ 85658		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 664/756 Rpt: 667/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderhoek, Edith <hr/> 6 Contributor address; City; State; Zip Code Jacksonville, FL 32224	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderhoek, Edith <hr/> Contributor address; City; State; Zip Code Jacksonville, FL 32224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderhoek, Edith <hr/> Contributor address; City; State; Zip Code Jacksonville, FL 32224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderhoek, Edith <hr/> Contributor address; City; State; Zip Code Jacksonville, FL 32224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderhoek, Edith <hr/> Contributor address; City; State; Zip Code Jacksonville, FL 32224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 665/756 Rpt: 668/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderhoek, Edith	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Jacksonville, FL 32224		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderhoek, Edith	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Jacksonville, FL 32224		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderhoek, Edith	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Jacksonville, FL 32224		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderhoek, Edith	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Jacksonville, FL 32224		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderhoek, Edith	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Jacksonville, FL 32224		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 666/756 Rpt: 669/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderhoek, Edith <hr/> 6 Contributor address; City; State; Zip Code Jacksonville, FL 32224	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderhoek, Edith <hr/> Contributor address; City; State; Zip Code Jacksonville, FL 32224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vandervennet, William <hr/> Contributor address; City; State; Zip Code San Mateo, CA 94403	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vannatter, Carl <hr/> Contributor address; City; State; Zip Code Milan, MI 48160	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanover, Joyce <hr/> Contributor address; City; State; Zip Code Abingdon, VA 24211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 667/756 Rpt: 670/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasfaret, Gordon <hr/> 6 Contributor address; City; State; Zip Code Prescott, AZ 86305	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Project Manager/owner		9 Employer (See Instructions) GV Enterprises.com
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasilia, Geri <hr/> Contributor address; City; State; Zip Code GRANTS PASS, OR 97526	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasilia, Geri <hr/> Contributor address; City; State; Zip Code GRANTS PASS, OR 97526	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasilogambros, William <hr/> Contributor address; City; State; Zip Code Arlington Heights, IL 60005-3862	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Guillermo <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 668/756 Rpt: 671/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Guillermo <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78216	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Nelda <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaughan MSI, David <hr/> Contributor address; City; State; Zip Code Mahopac, NY 10541	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) It support		Employer (See Instructions) MicroNet solutions
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaughan MSI, David <hr/> Contributor address; City; State; Zip Code Mahopac, NY 10541	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) It support		Employer (See Instructions) MicroNet solutions
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vazquez, Angel <hr/> Contributor address; City; State; Zip Code Natick, MA 01760	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Clubhouse manager		Employer (See Instructions) SB

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 669/756 Rpt: 672/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vela Rice, Susan <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Agency		9 Employer (See Instructions) TWDB
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vella, Paul <hr/> Contributor address; City; State; Zip Code DELAND, FL 32724	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vender, Cecilia <hr/> Contributor address; City; State; Zip Code Escondido, CA 92027	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Venkataraman, Raj <hr/> Contributor address; City; State; Zip Code Providence, RI 02905	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vertel, Barbara <hr/> Contributor address; City; State; Zip Code Deerfield, IL 60015	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 670/756 Rpt: 673/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vertel, Barbara <hr/> 6 Contributor address; City; State; Zip Code Deerfield, IL 60015	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vertner, Teresa <hr/> Contributor address; City; State; Zip Code Richmond, VA 23229	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vesel, Barbara <hr/> Contributor address; City; State; Zip Code Duluth, MN 55812	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vesel, Barbara <hr/> Contributor address; City; State; Zip Code Duluth, MN 55812	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vice-Murray, Sandra <hr/> Contributor address; City; State; Zip Code Kansas City, MO 64111	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 671/756 Rpt: 674/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vice-Murray, Sandra <hr/> 6 Contributor address; City; State; Zip Code Kansas City, MO 64111	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Victor, Paula <hr/> Contributor address; City; State; Zip Code Boynton Beach, FL 33435	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidal-kendall, Olive <hr/> Contributor address; City; State; Zip Code Columbus, GA 31907	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Columbus Technical College
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Ray <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Emily <hr/> Contributor address; City; State; Zip Code Gig Harbor, WA 98335	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Nursing Care Consultant		Employer (See Instructions) DSHS AL TSA RCS (state of WA)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 672/756 Rpt: 675/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Laurel <hr/> 6 Contributor address; City; State; Zip Code Wasilla, AK 99687	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Laurel <hr/> Contributor address; City; State; Zip Code Wasilla, AK 99687	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Laurel <hr/> Contributor address; City; State; Zip Code Wasilla, AK 99687	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Laurel <hr/> Contributor address; City; State; Zip Code Wasilla, AK 99687	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Laurel <hr/> Contributor address; City; State; Zip Code Wasilla, AK 99687	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 673/756 Rpt: 676/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Laurel <hr/> 6 Contributor address; City; State; Zip Code Wasilla, AK 99687	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vinitskaya, Lena <hr/> Contributor address; City; State; Zip Code Henderson, NV 89012	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Counsel		Employer (See Instructions) Pulse bio
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vinson, Sheryl <hr/> Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorsanger, Debbie <hr/> Contributor address; City; State; Zip Code yardley, PA 19067	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorsanger, Debbie <hr/> Contributor address; City; State; Zip Code yardley, PA 19067	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 674/756 Rpt: 677/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vorsanger, Debbie	7 Amount of Contribution (\$) \$11.00
6 Contributor address; City; State; Zip Code yardley, PA 19067		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voso, Deborah	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Southport, NC 28461-8373		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALBURN, LARRY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LEESBURG, FL 34748		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALBURN, LARRY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LEESBURG, FL 34748		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALBURN, LARRY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LEESBURG, FL 34748		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 675/756 Rpt: 678/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLS, JULIE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Newport News, VA 23606		
8 Principal occupation / Job title (See Instructions) Social worker		9 Employer (See Instructions) Self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, Sandra	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HUNTSVILLE, AL 35801		
Principal occupation / Job title (See Instructions) manager		Employer (See Instructions) N/A
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRTH, HARRY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BURBANK, CA 91505		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRTH, HARRY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BURBANK, CA 91505		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRTH, HARRY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BURBANK, CA 91505		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 676/756 Rpt: 679/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRTH, HARRY <hr/> 6 Contributor address; City; State; Zip Code BURBANK, CA 91505	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wacholder, Myron <hr/> Contributor address; City; State; Zip Code Laguna Beach, CA 92651	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddle, Inge <hr/> Contributor address; City; State; Zip Code Vestavia, AL 35243	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddle, Inge <hr/> Contributor address; City; State; Zip Code Vestavia, AL 35243	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddle, Inge <hr/> Contributor address; City; State; Zip Code Vestavia, AL 35243	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 677/756 Rpt: 680/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wadman, Debbie	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Wichita, KS 67208		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wadman, Debbie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Wichita, KS 67208		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wager, Chuck	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Columbus, OH 43212		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waite, Henry	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Yellow Springs, OH 45387		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waldrip, Steven	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Aptos, CA 95003		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Ridhwan Foundation

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 678/756 Rpt: 681/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Madison, AL 35758	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Wanda <hr/> Contributor address; City; State; Zip Code San Pablo, CA 94806	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Mail Clerk		Employer (See Instructions) Homeland security
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Wanda <hr/> Contributor address; City; State; Zip Code San Pablo, CA 94806	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Mail Clerk		Employer (See Instructions) Homeland security
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Wanda <hr/> Contributor address; City; State; Zip Code San Pablo, CA 94806	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Mail Clerk		Employer (See Instructions) Homeland security
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waller, Barry <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 679/756 Rpt: 682/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallock, Shelley <hr/> 6 Contributor address; City; State; Zip Code Philadelphia, PA 19102-4577	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Associate Professor		9 Employer (See Instructions) Thomas Jefferson University
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallock, Shelley <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19102-4577	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Associate Professor		Employer (See Instructions) Thomas Jefferson University
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallock, Shelley <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19102-4577	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Associate Professor		Employer (See Instructions) Thomas Jefferson University
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallock, Shelley <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19102-4577	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Associate Professor		Employer (See Instructions) Thomas Jefferson University
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallock, Shelley <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19102-4577	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Associate Professor		Employer (See Instructions) Thomas Jefferson University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 680/756 Rpt: 683/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Fitchburg, MA 01420	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Constituent Services Director		9 Employer (See Instructions) Massachusetts Senate
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Jay <hr/> Contributor address; City; State; Zip Code Petaluma, CA 94952	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Jerry <hr/> Contributor address; City; State; Zip Code Oceanside, CA 92057	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Leonie <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Leonie <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N.a.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 681/756 Rpt: 684/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Nicolena <hr/> 6 Contributor address; City; State; Zip Code New Hope, PA 18938	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Product Owner		9 Employer (See Instructions) Axispoint
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walther, Leonie <hr/> Contributor address; City; State; Zip Code Gretna, LA 70056	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Yong <hr/> Contributor address; City; State; Zip Code SHARON, MA 02067	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SWE		Employer (See Instructions) UST
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Yong <hr/> Contributor address; City; State; Zip Code SHARON, MA 02067	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SWE		Employer (See Instructions) UST
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ware, Robert <hr/> Contributor address; City; State; Zip Code Candler, NC 28715	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 682/756 Rpt: 685/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waring, Phillip <hr/> 6 Contributor address; City; State; Zip Code Coto De Caza, CA 92679	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Paula <hr/> Contributor address; City; State; Zip Code BUSHKILL, PA 18324	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Paula <hr/> Contributor address; City; State; Zip Code Bushkill, PA 18324	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warschauer, Lynn <hr/> Contributor address; City; State; Zip Code Chico, CA 95928	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasil, Jim <hr/> Contributor address; City; State; Zip Code Merritt Island, FL 32952	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 683/756 Rpt: 686/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasil, Jim <hr/> 6 Contributor address; City; State; Zip Code Merritt Island, FL 32952	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasil, Jim <hr/> Contributor address; City; State; Zip Code Merritt Island, FL 32952	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasil, Jim <hr/> Contributor address; City; State; Zip Code Merritt Island, FL 32952	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watlington, Romulus <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27406	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watlington, Romulus <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27406	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 684/756 Rpt: 687/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watlington, Romulus <hr/> 6 Contributor address; City; State; Zip Code Greensboro, NC 27406	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watlington, Romulus <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27406	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Gray <hr/> Contributor address; City; State; Zip Code Lexington, MA 02421	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Ruth <hr/> Contributor address; City; State; Zip Code Camarillo, CA 93010	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) Gold Coast Health Plan
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wayne, Ellen T <hr/> Contributor address; City; State; Zip Code Bronx, NY 10471	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Brooklyn College CUNY

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 685/756 Rpt: 688/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Claire <hr/> 6 Contributor address; City; State; Zip Code Springfield, VA 22153	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) not employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Craig <hr/> Contributor address; City; State; Zip Code Hilton Head Island, SC 29928	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Craig <hr/> Contributor address; City; State; Zip Code Hilton Head Island, SC 29928	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Dawn <hr/> Contributor address; City; State; Zip Code Siloam Springs, AR 72761	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Dawn <hr/> Contributor address; City; State; Zip Code Siloam Springs, AR 72761	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 686/756 Rpt: 689/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Ellingsworth	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code DeKalb, IL 60115		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Ellingsworth	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code DeKalb, IL 60115		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Elva	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Lockhart, TX 78644		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Larry	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Pollock Pines, CA 95726		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Larry	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Pollock Pines, CA 95726		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 687/756 Rpt: 690/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Larry <hr/> 6 Contributor address; City; State; Zip Code Pollock Pines, CA 95726	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Larry <hr/> Contributor address; City; State; Zip Code Pollock Pines, CA 95726	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Larry <hr/> Contributor address; City; State; Zip Code Pollock Pines, CA 95726	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Larry <hr/> Contributor address; City; State; Zip Code Pollock Pines, CA 95726	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Larry <hr/> Contributor address; City; State; Zip Code Pollock Pines, CA 95726	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 688/756 Rpt: 691/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Robert <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77008	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webet, Carole <hr/> Contributor address; City; State; Zip Code Manhattan, NY 10025	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeks Grigsby, Kimberly <hr/> Contributor address; City; State; Zip Code Roswell, GA 30076	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Trauma Recovery Coach		Employer (See Instructions) Kimberly Weeks Coaching LLC.
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeks Grigsby, Kimberly <hr/> Contributor address; City; State; Zip Code Roswell, GA 30076	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Trauma Recovery Coach		Employer (See Instructions) Kimberly Weeks Coaching LLC.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weidenman, Meredith <hr/> Contributor address; City; State; Zip Code Brookfield, CT 06804	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 689/756 Rpt: 692/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weil, Miriam <hr/> 6 Contributor address; City; State; Zip Code Belmont, MA 02478	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) EHS		9 Employer (See Instructions) Boston Children's Hospital
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weilmann, Renee <hr/> Contributor address; City; State; Zip Code NEVADA CITY, CA 95959	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinberg, D <hr/> Contributor address; City; State; Zip Code Cornville, AZ 86425	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinberg, D <hr/> Contributor address; City; State; Zip Code Cornville, AZ 86425	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinberg, D <hr/> Contributor address; City; State; Zip Code Cornville, AZ 86425	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 690/756 Rpt: 693/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinberg, D <hr/> 6 Contributor address; City; State; Zip Code Cornville, AZ 86425	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinberg, D <hr/> Contributor address; City; State; Zip Code Cornville, AZ 86425	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingarten, Merri <hr/> Contributor address; City; State; Zip Code New York, NY 10021	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Clinical psychologist		Employer (See Instructions) Self
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weingarten, Merri <hr/> Contributor address; City; State; Zip Code New York, NY 10021	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Clinical psychologist		Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weis, Carl <hr/> Contributor address; City; State; Zip Code Brewster, MA 02631	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 691/756 Rpt: 694/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weisman, Caroll <hr/> 6 Contributor address; City; State; Zip Code Waxahachie, TX 75167	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Edward <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94301	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Karen <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85254	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Roberta <hr/> Contributor address; City; State; Zip Code Potomac, MD 20854	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss-Hessler, Paula <hr/> Contributor address; City; State; Zip Code Freeland, WA 98249	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 692/756 Rpt: 695/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss-Hessler, Paula <hr/> 6 Contributor address; City; State; Zip Code Freeland, WA 98249	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welber, Brigid <hr/> Contributor address; City; State; Zip Code Marblehead, MA 01945	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Tufts Medical Center
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welbourn, Janet <hr/> Contributor address; City; State; Zip Code Menifee, CA 92584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welbourn, Janet <hr/> Contributor address; City; State; Zip Code Menifee, CA 92584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon, Frances <hr/> Contributor address; City; State; Zip Code Spartanburg, SC 29302	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 693/756 Rpt: 696/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weller, Brian <hr/> 6 Contributor address; City; State; Zip Code Albuquerque, NM 87111	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Albuquerque public schools
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welliver, Robert <hr/> Contributor address; City; State; Zip Code East Amherst, NY 14051	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wellman, Theresa <hr/> Contributor address; City; State; Zip Code Jeffersonville, VT 05464	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) lab technician		Employer (See Instructions) University of Vermont
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Ann <hr/> Contributor address; City; State; Zip Code San Diego, CA 92176	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Paraeducator		Employer (See Instructions) SDUSD
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Margaret (Betsy) <hr/> Contributor address; City; State; Zip Code Kings Mountain, NC 28086-9278	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 694/756 Rpt: 697/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werblow, Dorothy	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code Euclid, WY 44132		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wesley, Patricia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Boothwyn, PA 19061		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wesley, Patricia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Boothwyn, PA 19061		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wesley, Patricia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Boothwyn, PA 19061		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wesley, Patricia	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Boothwyn, PA 19061		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 695/756 Rpt: 698/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wesley, Patricia <hr/> 6 Contributor address; City; State; Zip Code Boothwyn, PA 19061	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Roger <hr/> Contributor address; City; State; Zip Code Colorado Springs, CO 80909-2160	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wexler, Mike <hr/> Contributor address; City; State; Zip Code Medina, OH 44256	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wey, Kathryn <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76086	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Tedi <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90043	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 696/756 Rpt: 699/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Henrietta	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Chicago, IL 60628		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Henrietta	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Chicago, IL 60628		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Henrietta	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chicago, IL 60628		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Henrietta	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chicago, IL 60628		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Andrew	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Chevy Chase, MD 20815		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 697/756 Rpt: 700/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Andrew	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Chevy Chase, MD 20815		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Andrew	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chevy Chase, MD 20815		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Andrew	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Chevy Chase, MD 20815		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, David	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Douglasville, GA 30135		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Douglas County Board of Ed
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitehead, Jacqueline	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Middletown, CT 06457		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 698/756 Rpt: 701/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Helen <hr/> 6 Contributor address; City; State; Zip Code Port Gibson, MS 39150	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Helen <hr/> Contributor address; City; State; Zip Code Port Gibson, MS 39150	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggins, Fran <hr/> Contributor address; City; State; Zip Code Clearwater, FL 33760	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilcox, Arthur <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27408	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Leasing Agent		Employer (See Instructions) Wilcox & Assoc
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilcox, Daniel <hr/> Contributor address; City; State; Zip Code Chillicothe, OH 45601	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 699/756 Rpt: 702/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilde, Franceska <hr/> 6 Contributor address; City; State; Zip Code Fairfax Station, VA 22039	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkins, Michael <hr/> Contributor address; City; State; Zip Code Greenwell springs, LA 70739	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkins, Michael <hr/> Contributor address; City; State; Zip Code Greenwell springs, LA 70739	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkins, Sam <hr/> Contributor address; City; State; Zip Code San Rafael, CA 94903	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Finance/Investment Banking		Employer (See Instructions) Panoramic Advisors
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Kent <hr/> Contributor address; City; State; Zip Code brooklyn, NY 11215	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Acad		Employer (See Instructions) IPG

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 700/756 Rpt: 703/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Kent <hr/> 6 Contributor address; City; State; Zip Code brooklyn, NY 11215	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Acad		9 Employer (See Instructions) lpg
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Kent <hr/> Contributor address; City; State; Zip Code brooklyn, NY 11215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Acad		Employer (See Instructions) lpg
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Kent <hr/> Contributor address; City; State; Zip Code brooklyn, NY 11215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Acad		Employer (See Instructions) IPG
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Kent <hr/> Contributor address; City; State; Zip Code brooklyn, NY 11215	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Acad		Employer (See Instructions) lpg
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Bernadette <hr/> Contributor address; City; State; Zip Code Mesa, AZ 85209	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 701/756 Rpt: 704/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Bernadette <hr/> 6 Contributor address; City; State; Zip Code Mesa, AZ 85209	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Bernadette <hr/> Contributor address; City; State; Zip Code Mesa, AZ 85209	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Helen <hr/> Contributor address; City; State; Zip Code Flint, MI 48505	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Arrangement Counselor		Employer (See Instructions) Lawrence E. Moon Funeral Home
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, India <hr/> Contributor address; City; State; Zip Code Sebastopol, CA 95472	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, James <hr/> Contributor address; City; State; Zip Code Ozark, AL 36360	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 702/756 Rpt: 705/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Lynne <hr/> 6 Contributor address; City; State; Zip Code Manhattan, NY 10001	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Mary Jean <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78239	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Mercedes <hr/> Contributor address; City; State; Zip Code Garfield Heights, OH 44125-3709	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Shift supervisor		Employer (See Instructions) CVS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Nitalya <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85748	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Orthodontist		Employer (See Instructions) self
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Phillip <hr/> Contributor address; City; State; Zip Code Detroit, MI 48227	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Metropolis

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 703/756 Rpt: 706/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Roland (Ron)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Millersville, MD 21108	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Roland (Ron)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Millersville, MD 21108	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Roland (Ron)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Millersville, MD 21108	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams-Parker, Sandra	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Fayetteville, NC 28312	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams-Parker, Sandra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fayetteville, NC 28312	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 704/756 Rpt: 707/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams-Parker, Sandra <hr/> 6 Contributor address; City; State; Zip Code Fayetteville, NC 28312	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Rodney <hr/> Contributor address; City; State; Zip Code Gloucester Point, VA 23072	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Transportation		Employer (See Instructions) YCSD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willie, Janet <hr/> Contributor address; City; State; Zip Code Bethel, ME 04217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Massage therapist		Employer (See Instructions) Self
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willie, Janet <hr/> Contributor address; City; State; Zip Code Bethel, ME 04217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Massage therapist		Employer (See Instructions) Self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Debra <hr/> Contributor address; City; State; Zip Code Dayton, NV 89403	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 705/756 Rpt: 708/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Debra <hr/> 6 Contributor address; City; State; Zip Code Dayton, NV 89403	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Debra <hr/> Contributor address; City; State; Zip Code Dayton, NV 89403	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Debra <hr/> Contributor address; City; State; Zip Code Dayton, NV 89403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Debra <hr/> Contributor address; City; State; Zip Code Dayton, NV 89403	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Debra <hr/> Contributor address; City; State; Zip Code Dayton, NV 89403	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 706/756 Rpt: 709/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Felecia <hr/> 6 Contributor address; City; State; Zip Code Memphis, TN 38105	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Signature Healthcare
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Felecia <hr/> Contributor address; City; State; Zip Code Memphis, TN 38105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Signature Healthcare
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Felecia <hr/> Contributor address; City; State; Zip Code Memphis, TN 38105	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Signature Healthcare
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Grace <hr/> Contributor address; City; State; Zip Code Rockford, IL 61101	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Link <hr/> Contributor address; City; State; Zip Code Newbury Park, CA 91320	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Software Architech		Employer (See Instructions) Compulink

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 707/756 Rpt: 710/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Link <hr/> 6 Contributor address; City; State; Zip Code Newbury Park, CA 91320	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Software Architech		9 Employer (See Instructions) Compulink
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Link <hr/> Contributor address; City; State; Zip Code Newbury Park, CA 91320	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software Architech		Employer (See Instructions) Compulink
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson II, Marvin <hr/> Contributor address; City; State; Zip Code Fairview, WV 26570	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wina, Glenda <hr/> Contributor address; City; State; Zip Code Culver City, CA 90230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winter, Brian And Pat <hr/> Contributor address; City; State; Zip Code Ellicott City, MD 21042	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Ophthalmologist		Employer (See Instructions) Medical Eye Center

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 708/756 Rpt: 711/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winter, Brian And Pat <hr/> 6 Contributor address; City; State; Zip Code Ellicott City, MD 21042	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Ophthalmologist		9 Employer (See Instructions) Medical Eye Center
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winter, Brian And Pat <hr/> Contributor address; City; State; Zip Code Ellicott City, MD 21042	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Ophthalmologist		Employer (See Instructions) Medical Eye Center
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winter, Brian And Pat <hr/> Contributor address; City; State; Zip Code Ellicott City, MD 21042	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Ophthalmologist		Employer (See Instructions) Medical Eye Center
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winter, Brian And Pat <hr/> Contributor address; City; State; Zip Code Ellicott City, MD 21042	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Ophthalmologist		Employer (See Instructions) Medical Eye Center
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winterbottom, Carol <hr/> Contributor address; City; State; Zip Code May's Landing, NJ 08330	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 709/756 Rpt: 712/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winterbottom, Carol <hr/> 6 Contributor address; City; State; Zip Code May's Landing, NJ 08330	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winterbottom, Carol <hr/> Contributor address; City; State; Zip Code May's Landing, NJ 08330	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, Maurice <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, Maurice <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, Maurice <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 710/756 Rpt: 713/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, Maurice	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Dallas, TX 75231		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, Maurice	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75231		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, Maurice	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Dallas, TX 75231		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wirth, Paula	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Chandler, AZ 85286		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wirth, Paula	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chandler, AZ 85286		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 711/756 Rpt: 714/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wirth, Paula <hr/> 6 Contributor address; City; State; Zip Code Chandler, AZ 85286	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiseman, Hal <hr/> Contributor address; City; State; Zip Code Hotchkiss, CO 81419	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiseman, Hal <hr/> Contributor address; City; State; Zip Code Hotchkiss, CO 81419	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Withrow, Matthew <hr/> Contributor address; City; State; Zip Code Romeo, MI 48065	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Stellantis
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witkin, Bonita <hr/> Contributor address; City; State; Zip Code Gulf breeze, FL 32563	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Soccer mom		Employer (See Instructions) My kids

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 712/756 Rpt: 715/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witkin, Bonita	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Gulf breeze, FL 32563		
8 Principal occupation / Job title (See Instructions) Soccer mom		9 Employer (See Instructions) My kids
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witonsky, carl	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Bryn Mawr, PA 19010		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woelper Jr, Gordon L	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Jupiter, FL 33458		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Carol	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Villas, NJ 08251		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfe, Gary	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Chicago, IL 60611		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 713/756 Rpt: 716/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wong, Frank <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75023	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wong, Frank <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wong, Frank <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodruff, Claudia <hr/> Contributor address; City; State; Zip Code Glenview, IL 60025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodruff, Samuel <hr/> Contributor address; City; State; Zip Code Oak Creek, WI 53154-5037	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 714/756 Rpt: 717/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Sandra <hr/> 6 Contributor address; City; State; Zip Code Arlington, VA 22209	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wozniak, Rachel <hr/> Contributor address; City; State; Zip Code Portland, OR 97206	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Joyce <hr/> Contributor address; City; State; Zip Code Omaha, NE 68116	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wroubel, Leo <hr/> Contributor address; City; State; Zip Code Washington, MI 48094	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wych, Guy <hr/> Contributor address; City; State; Zip Code Caledonia, IL 61011	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 715/756 Rpt: 718/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wych, Guy	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Caledonia, IL 61011		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wych, Guy	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Caledonia, IL 61011		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wychor, Mindy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Rosemount, MN 55068		
Principal occupation / Job title (See Instructions) Elementary School Kitchen Manager		Employer (See Instructions) ISD 196
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyld, C.	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Las Vegas, NV 89148		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyld, C.	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Las Vegas, NV 89148		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 716/756 Rpt: 719/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyld, C.	7 Amount of Contribution (\$) \$4.00
6 Contributor address; City; State; Zip Code Las Vegas, NV 89148		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyld, C.	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Las Vegas, NV 89148		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyld, C.	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Las Vegas, NV 89148		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yang, Stringner	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code San Gabriel, CA 91775		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yee, Samuel	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Barnstable, MA 02632		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 717/756 Rpt: 720/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yellin, Dorothy <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92130	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yellin, Dorothy <hr/> Contributor address; City; State; Zip Code San Diego, CA 92130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Charles <hr/> Contributor address; City; State; Zip Code Taos, NM 87571-9528	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Charles <hr/> Contributor address; City; State; Zip Code Taos, NM 87571-9528	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Patsy <hr/> Contributor address; City; State; Zip Code Coupland, TX 78615	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 718/756 Rpt: 721/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Patsy	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Coupland, TX 78615		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young-Esparza, Renee	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Phoenix, AZ 85041		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Deer valley unified district
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young-Esparza, Renee	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Phoenix, AZ 85041		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Deer valley unified district
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yuhas, Pauline	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Waterville, WA 98858		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yuhas, Pauline	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Waterville, WA 98858		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 719/756 Rpt: 722/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yurasek, Kelly	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Oak Park, IL 60304		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaja, Gertrude	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Streamwood, IL 60107		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zavada, Katherine	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Burlington, WI 53105		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zavada, Katherine	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Burlington, WI 53105		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zavada, Katherine	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Burlington, WI 53105		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 720/756 Rpt: 723/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zavada, Katherine <hr/> 6 Contributor address; City; State; Zip Code Burlington, WI 53105	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zavada, Katherine <hr/> Contributor address; City; State; Zip Code Burlington, WI 53105	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zavada, Katherine <hr/> Contributor address; City; State; Zip Code Burlington, WI 53105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zavisch, Teresa <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zeitlin, June <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 721/756 Rpt: 724/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zemsky, Jonathan	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Springfield, IL 62712		
8 Principal occupation / Job title (See Instructions) Occupational therapist		9 Employer (See Instructions) Rochester 3a schools
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zemsky, Jonathan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Springfield, IL 62712		
Principal occupation / Job title (See Instructions) Occupational therapist		Employer (See Instructions) Rochester 3a Schools
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zepeda, Edgar	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Lynnwood, WA 98036		
Principal occupation / Job title (See Instructions) Clean		Employer (See Instructions) Cleaner
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zielske, Rev. Jonathan	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Saint Paul, MN 55105		
Principal occupation / Job title (See Instructions) Minister		Employer (See Instructions) Holy Cross Lutheran Church
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) acosta, Laurinda	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Social Services		Employer (See Instructions) Health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 722/756 Rpt: 725/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) azen, colleen <hr/> 6 Contributor address; City; State; Zip Code los angeles, CA 90068	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) azen, colleen <hr/> Contributor address; City; State; Zip Code los angeles, CA 90068	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) azen, colleen <hr/> Contributor address; City; State; Zip Code los angeles, CA 90068	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) bagni, martha <hr/> Contributor address; City; State; Zip Code ELIOT, ME 03903	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ball, brenda <hr/> Contributor address; City; State; Zip Code Oak Park, IL 60304	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 723/756 Rpt: 726/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ball, brenda	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code Oak Park, IL 60304		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) barbeito, carol	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ft collins, CO 80528		
Principal occupation / Job title (See Instructions) executive		Employer (See Instructions) Earth Protect
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) bowden, bernard	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code NASHVILLE, TN 37221		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) brady, rebecca	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Perry, OK 73077		
Principal occupation / Job title (See Instructions) Caregiver		Employer (See Instructions) Patak
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) brady, rebecca	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Perry, OK 73077		
Principal occupation / Job title (See Instructions) Caregiver		Employer (See Instructions) Patak

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 724/756 Rpt: 727/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) brunk, ladonna <hr/> 6 Contributor address; City; State; Zip Code Eldora, IA 50627	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) carnie, twyla <hr/> Contributor address; City; State; Zip Code HOMEWOOD, IL 60430	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Tsa
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caspersson, vicki <hr/> Contributor address; City; State; Zip Code victor, NY 14564	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) graphics		Employer (See Instructions) westside news
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) caspersson, vicki <hr/> Contributor address; City; State; Zip Code victor, NY 14564	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) graphics		Employer (See Instructions) westside news
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) chang, april lec <hr/> Contributor address; City; State; Zip Code Newark, DE 19711	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 725/756 Rpt: 728/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) chang, april lec	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Newark, DE 19711		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) cherry, charles	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code newtown square, PA 19073		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) chyo, gi suk	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pacific Grove, CA 93950		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) chyo, gi suk	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Pacific Grove, CA 93950		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) chyo, gi suk	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Pacific Grove, CA 93950		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 726/756 Rpt: 729/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ciarelli, damon <hr/> 6 Contributor address; City; State; Zip Code New York, NY 11778	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) computer programmer		9 Employer (See Instructions) reelio inc.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) cioffi, nick <hr/> Contributor address; City; State; Zip Code Ninety Six, SC 29666	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) de vries, barbara <hr/> Contributor address; City; State; Zip Code milford, PA 18337	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) designer		Employer (See Instructions) self
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) deFluiter, Stephen <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) deFluiter, Stephen <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 727/756 Rpt: 730/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) deKeiser-Moulton, Karyn	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Greenville, MI 48838		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) deKeiser-Moulton, Karyn	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Greenville, MI 48838		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) delsarte, jea	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Atlanta, GA 30309		
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) mom consultants
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) du Pont, Anne Lloyd	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Kansas City, MO 64133		
Principal occupation / Job title (See Instructions) Restoration Artist/Mason Alternative healing practitioner		Employer (See Instructions) self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) du Pont, Anne Lloyd	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Kansas City, MO 64133		
Principal occupation / Job title (See Instructions) Restoration Artist/Mason Alternative healing practitioner		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 728/756 Rpt: 731/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) du Pont, Anne Lloyd <hr/> 6 Contributor address; City; State; Zip Code Kansas City, MO 64133	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Restoration Artist/Mason Alternative healing practitioner		9 Employer (See Instructions) self
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) du Pont, Anne Lloyd <hr/> Contributor address; City; State; Zip Code Kansas City, MO 64133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Restoration Artist/Mason Alternative healing practitioner		Employer (See Instructions) self
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) du Pont, Anne Lloyd <hr/> Contributor address; City; State; Zip Code Kansas City, MO 64133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Restoration Artist/Mason Alternative healing practitioner		Employer (See Instructions) self
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) duarte, jorge <hr/> Contributor address; City; State; Zip Code Miami, FL 33143	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jorge A. Duarte PA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) e sacco jr, gregory <hr/> Contributor address; City; State; Zip Code Rumson, NJ 07760	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 729/756 Rpt: 732/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) e sacco jr, gregory	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Rumson, NJ 07760		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) e sacco jr, gregory	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Rumson, NJ 07760		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) e sacco jr, gregory	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Rumson, NJ 07760		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) e sacco jr, gregory	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Rumson, NJ 07760		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) e sacco jr, gregory	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Rumson, NJ 07760		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 730/756 Rpt: 733/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) e sacco jr, gregory	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Rumson, NJ 07760		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) e sacco jr, gregory	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Rumson, NJ 07760		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) e sacco jr, gregory	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Rumson, NJ 07760		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) eadie, stacey	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code West Chester, PA 19380		
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions) Maris Grove
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) eadie, stacey	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code West Chester, PA 19380		
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions) Maris Grove

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 731/756 Rpt: 734/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) elterman, moises <hr/> 6 Contributor address; City; State; Zip Code San anselmo, CA 94960-2233	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) emeh, samuel <hr/> Contributor address; City; State; Zip Code SNELLVILLE, GA 30039	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) Lively stones min
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) feist, pablo <hr/> Contributor address; City; State; Zip Code New York, NY 10021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) fish, marsha <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30338	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) fisk, julie <hr/> Contributor address; City; State; Zip Code cedar springs, MI 49319	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 732/756 Rpt: 735/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) fisk, julie	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code cedar springs, MI 49319		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) frump, robert	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Summit, NJ 07901-4504		
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) Morgan Stanley
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gandhi, jashvant	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gandhi, jashvant	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gandhi, jashvant	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Houston, TX 77084		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 733/756 Rpt: 736/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gandhi, jashvant <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77084	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gardiner, thomas <hr/> Contributor address; City; State; Zip Code Kemmerer, WY 83101	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gardiner, thomas <hr/> Contributor address; City; State; Zip Code Kemmerer, WY 83101	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gary, paul <hr/> Contributor address; City; State; Zip Code willingboro, NJ 08046	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gehring, katherine <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 734/756 Rpt: 737/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gehring, katherine <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77381	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gephardt, ann <hr/> Contributor address; City; State; Zip Code Franklin, MA 02038	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Retired college avp		Employer (See Instructions) nassau community collehe
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gephardt, ann <hr/> Contributor address; City; State; Zip Code Franklin, MA 02038	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Retired college avp		Employer (See Instructions) nassau community collehe
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gephardt, ann <hr/> Contributor address; City; State; Zip Code Franklin, MA 02038	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired college avp		Employer (See Instructions) nassau community collehe
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gephardt, ann <hr/> Contributor address; City; State; Zip Code Franklin, MA 02038	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired college avp		Employer (See Instructions) nassau community collehe

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 735/756 Rpt: 738/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) giffords, gloria <hr/> 6 Contributor address; City; State; Zip Code Tucson, AZ 85726	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) historian		9 Employer (See Instructions) self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gilbert, pressly <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28207	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gilbert, pressly <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28207	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) grant, philip <hr/> Contributor address; City; State; Zip Code brooklyn, OR 11217	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gulley, ann <hr/> Contributor address; City; State; Zip Code austin, TX 78745	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 736/756 Rpt: 739/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gulley, ann <hr/> 6 Contributor address; City; State; Zip Code austin, TX 78745	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) haas, pamela <hr/> Contributor address; City; State; Zip Code CHANDLER, AZ 85226	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Customer service		Employer (See Instructions) Wells Fargo Auto
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hassenfritz, James <hr/> Contributor address; City; State; Zip Code Mt. Pleasant, IA 52641	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hassenfritz, James <hr/> Contributor address; City; State; Zip Code Mt. Pleasant, IA 52641	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hasslacher, elisabeth <hr/> Contributor address; City; State; Zip Code BALA CYNWYD, PA 19004	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 737/756 Rpt: 740/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hasslacher, elisabeth	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code BALA CYNWYD, PA 19004		
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) henderson, joe	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Huntsville, TX 77340		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) henderson, joe	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Huntsville, TX 77340		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hood, richard	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Mosheim, TN 37818		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) jalili, fahimeh	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Warren, NJ 07059		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 738/756 Rpt: 741/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kahnert, vonnie	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Burnsville, MN 55306		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kahnert, vonnie	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Burnsville, MN 55306		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kahnert, vonnie	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Burnsville, MN 55306		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kahnert, vonnie	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Burnsville, MN 55306		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kahnert, vonnie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Burnsville, MN 55306		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 739/756 Rpt: 742/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kahnert, vonnie <hr/> 6 Contributor address; City; State; Zip Code Burnsville, MN 55306	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kahnert, vonnie <hr/> Contributor address; City; State; Zip Code Burnsville, MN 55306	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kahnert, vonnie <hr/> Contributor address; City; State; Zip Code Burnsville, MN 55306	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kain, james <hr/> Contributor address; City; State; Zip Code woolwich twp, NJ 08085	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ceo		Employer (See Instructions) healthcare commons
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kappes, janet <hr/> Contributor address; City; State; Zip Code Charleston, IL 61920	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 740/756 Rpt: 743/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kendall, elise	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code newport coast, CA 92657		
8 Principal occupation / Job title (See Instructions) Insurance		9 Employer (See Instructions) Liberty Mutual
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kendall, elise	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code newport coast, CA 92657		
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Liberty Mutual
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kilwein, dianne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code escondido, CA 92029		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kilwein, dianne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code escondido, CA 92029		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kinslow, robert	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code honolulu, HI 96816		
Principal occupation / Job title (See Instructions) Sustainability Speaker		Employer (See Instructions) Social Entrepreneur

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 741/756 Rpt: 744/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kirk, michael <hr/> 6 Contributor address; City; State; Zip Code bloomsburg, PA 17815	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) te		9 Employer (See Instructions) ssa
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kreuser, mary <hr/> Contributor address; City; State; Zip Code Theresa, WI 53091	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) krow-lucal, STEVEN <hr/> Contributor address; City; State; Zip Code atlanta, GA 30341	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) krow-lucal, STEVEN <hr/> Contributor address; City; State; Zip Code Sunnyvale, CA 94086	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lawton, Virginia <hr/> Contributor address; City; State; Zip Code Palmer, AK 99645	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 742/756 Rpt: 745/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lawton, Virginia	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Palmer, AK 99645		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lee, warren	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code hollywood, FL 33020		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lin, irene	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code newport coast, CA 92657		
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions) self employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) malamud, cary	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COOPER CITY, FL 33330		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) malamud, cary	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COOPER CITY, FL 33330		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 743/756 Rpt: 746/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) malamud, cary <hr/> 6 Contributor address; City; State; Zip Code COOPER CITY, FL 33330	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) malamud, cary <hr/> Contributor address; City; State; Zip Code COOPER CITY, FL 33330	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) malamud, cary <hr/> Contributor address; City; State; Zip Code COOPER CITY, FL 33330	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) malamud, cary <hr/> Contributor address; City; State; Zip Code COOPER CITY, FL 33330	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) malamud, cary <hr/> Contributor address; City; State; Zip Code COOPER CITY, FL 33330	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 744/756 Rpt: 747/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) malamud, cary <hr/> 6 Contributor address; City; State; Zip Code COOPER CITY, FL 33330	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) manchee, janet <hr/> Contributor address; City; State; Zip Code Spring, TX 77388-5204	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) manchee, janet <hr/> Contributor address; City; State; Zip Code Spring, TX 77388-5204	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) manchee, janet <hr/> Contributor address; City; State; Zip Code Spring, TX 77388-5204	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) manchee, janet <hr/> Contributor address; City; State; Zip Code Spring, TX 77388-5204	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 745/756 Rpt: 748/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) manchee, janet <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77388-5204	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) manchee, janet <hr/> Contributor address; City; State; Zip Code Spring, TX 77388-5204	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) manchee, janet <hr/> Contributor address; City; State; Zip Code Spring, TX 77388-5204	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) manchee, janet <hr/> Contributor address; City; State; Zip Code Spring, TX 77388-5204	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) manchee, janet <hr/> Contributor address; City; State; Zip Code Spring, TX 77388-5204	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 746/756 Rpt: 749/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mangrum, jo <hr/> 6 Contributor address; City; State; Zip Code Ashland city, TN 37015	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) martin, susan <hr/> Contributor address; City; State; Zip Code Rogers, AR 72756	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) menard, robert <hr/> Contributor address; City; State; Zip Code Pompano Beach, FL 33062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) monteith, carole <hr/> Contributor address; City; State; Zip Code Farmingdale, ME 04344	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) moreno, ev <hr/> Contributor address; City; State; Zip Code Avondale, AZ 85323	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 747/756 Rpt: 750/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) murray, timothy	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DECATUR, IL 62526		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) murray, timothy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DECATUR, IL 62526		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) murray, timothy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DECATUR, IL 62526		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nieman, joanne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Fernandina Beach, FL 32034		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nieman, joanne	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Fernandina Beach, FL 32034		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 748/756 Rpt: 751/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nieman, joanne <hr/> 6 Contributor address; City; State; Zip Code Fernandina Beach, FL 32034	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nieman, joanne <hr/> Contributor address; City; State; Zip Code Fernandina Beach, FL 32034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nieman, joanne <hr/> Contributor address; City; State; Zip Code Fernandina Beach, FL 32034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nieman, joanne <hr/> Contributor address; City; State; Zip Code Fernandina Beach, FL 32034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nieman, joanne <hr/> Contributor address; City; State; Zip Code Fernandina Beach, FL 32034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 749/756 Rpt: 752/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nieman, joanne <hr/> 6 Contributor address; City; State; Zip Code Fernandina Beach, FL 32034	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nieman, joanne <hr/> Contributor address; City; State; Zip Code Fernandina Beach, FL 32034	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) o'connell, maura <hr/> Contributor address; City; State; Zip Code New York, NY 10024	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) oakey, linda <hr/> Contributor address; City; State; Zip Code Woodbridge, VA 22192	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) peters, roselle <hr/> Contributor address; City; State; Zip Code Chico, CA 95926	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 750/756 Rpt: 753/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ribeau, sidney <hr/> 6 Contributor address; City; State; Zip Code BETHESDA, MD 20817	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) consultant		9 Employer (See Instructions) self employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ribeau, sidney <hr/> Contributor address; City; State; Zip Code BETHESDA, MD 20817	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) self employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) richards, edward <hr/> Contributor address; City; State; Zip Code windham, NH 03087	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) self
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) rindock, kathryn <hr/> Contributor address; City; State; Zip Code Breinigsville, PA 18031	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) roberts, karen <hr/> Contributor address; City; State; Zip Code Oxford, CT 06478	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 751/756 Rpt: 754/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) roy, michelle <hr/> 6 Contributor address; City; State; Zip Code LA, CA 90048	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) russak, fern <hr/> Contributor address; City; State; Zip Code portland, OR 97232	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) pediatrician		Employer (See Instructions) nw permanente
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) schaffer, james <hr/> Contributor address; City; State; Zip Code Indianapolis, IN 46208	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) University Professor		Employer (See Instructions) Indiana Tech. University
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) schiaivone, joe <hr/> Contributor address; City; State; Zip Code Huntington Beach, CA 92649	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) finance		Employer (See Instructions) qbe
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) schimberg, william <hr/> Contributor address; City; State; Zip Code Colorado Springs, CO 80919	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 752/756 Rpt: 755/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) scott, david <hr/> 6 Contributor address; City; State; Zip Code morristown, IN 46161	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) scott, david <hr/> Contributor address; City; State; Zip Code morristown, IN 46161	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) shivers, wade <hr/> Contributor address; City; State; Zip Code Dalzell, SC 29040	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Caretaker		Employer (See Instructions) Mother
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) shockley, ed <hr/> Contributor address; City; State; Zip Code Lewes, DE 19958	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) stanek, steven <hr/> Contributor address; City; State; Zip Code East McKeesport, PA 15035	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 753/756 Rpt: 756/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) stanek, steven <hr/> 6 Contributor address; City; State; Zip Code East McKeesport, PA 15035	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) sutherland, steve <hr/> Contributor address; City; State; Zip Code Santa Cruz, CA 95060	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) SSA Landscape Architects Inc.
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) sutherland, steve <hr/> Contributor address; City; State; Zip Code Santa Cruz, CA 95060	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) SSA Landscape Architects Inc.
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) theaman, mark <hr/> Contributor address; City; State; Zip Code Blaine, WA 98230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) theaman, mark <hr/> Contributor address; City; State; Zip Code Blaine, WA 98230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 754/756 Rpt: 757/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) theaman, mark	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Blaine, WA 98230		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) theaman, mark	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Blaine, WA 98230		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) theaman, mark	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Blaine, WA 98230		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) theaman, mark	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Blaine, WA 98230		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) theaman, mark	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Blaine, WA 98230		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 755/756 Rpt: 758/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) thompson, sheldon <hr/> 6 Contributor address; City; State; Zip Code alamo, TX 78516	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wadsworth, nanci <hr/> Contributor address; City; State; Zip Code North Port, FL 34289	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) waronker, leonard <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90067	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Record Producer		Employer (See Instructions) Warner Records
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) weis, jodi <hr/> Contributor address; City; State; Zip Code athol, ID 83801	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Mailcarrier		Employer (See Instructions) Usps
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) weissbrod, ellen <hr/> Contributor address; City; State; Zip Code Manhattan, NY 10013	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) real estate		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 756/756 Rpt: 759/774
2 FILER NAME Flip Texas Blue Fund		3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) whitacre, joan <hr/> 6 Contributor address; City; State; Zip Code nyack, NY 10960	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) movement therapist		9 Employer (See Instructions) self
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wilde, franceska <hr/> Contributor address; City; State; Zip Code fairfax station, VA 22039	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wilde, franceska <hr/> Contributor address; City; State; Zip Code fairfax station, VA 22039	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wilde, franceska <hr/> Contributor address; City; State; Zip Code fairfax station, VA 22039	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) zeitlin, june <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/15 Rpt:	2 FILER NAME Flip Texas Blue Fund	3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/31/2024	5 Payee name ActBlue	
6 Amount (\$) \$17.53 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name ActBlue	
Amount (\$) \$19.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name ActBlue	
Amount (\$) \$39.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/15 Rpt:	2 FILER NAME Flip Texas Blue Fund	3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/24/2024	5 Payee name ActBlue	
6 Amount (\$) \$93.79 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name ActBlue	
Amount (\$) \$835.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name ActBlue	
Amount (\$) \$8.86 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/15 Rpt:	2 FILER NAME Flip Texas Blue Fund	3 Filer ID (Ethics Commission Filers) 00088701
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4 Date 11/03/2024	5 Payee name ActBlue
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6 Amount (\$) \$2,713.84 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ActBlue
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Amount (\$) \$2,478.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/29/2024	Payee name Amalgamated Bank
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Amount (\$) \$12.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 275 Seventh Ave New York, NY 10001
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/15 Rpt:	2 FILER NAME Flip Texas Blue Fund	3 Filer ID (Ethics Commission Filers) 00088701
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4 Date 11/27/2024	5 Payee name Amalgamated Bank
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6 Amount (\$) \$58.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 275 Seventh Ave New York, NY 10001
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/30/2024	Payee name Amalgamated Bank
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Amount (\$) \$20.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 275 Seventh Ave New York, NY 10001
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name Amy, Amy
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Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1539 Serenada Ave Las Vegas, NV 89169
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contributions
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/15 Rpt:	2 FILER NAME Flip Texas Blue Fund	3 Filer ID (Ethics Commission Filers) 00088701
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4 Date 11/24/2024	5 Payee name Butterworth, Alice
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6 Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 907 W. Mlborn St. Marion, IN 46952
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/08/2024	Payee name Englander, Emily
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1111 Elizabeth Blvd Fort Worth, TX 76110-2620
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance Consulting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name Heller, Judy
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Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3335 NE 32nd Avenue Portland, OR 97212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/15 Rpt:	2 FILER NAME Flip Texas Blue Fund	3 Filer ID (Ethics Commission Filers) 00088701
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4 Date 11/24/2024	5 Payee name Heller, Judy
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6 Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3335 NE 32nd Avenue Portland, OR 97212
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name Imboden, Anne
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Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W Lake Ave Baltimore, MD 21210
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name Imboden, Anne
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Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W Lake Ave Baltimore, MD 21210
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/15 Rpt:	2 FILER NAME Flip Texas Blue Fund	3 Filer ID (Ethics Commission Filers) 00088701
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4 Date 11/10/2024	5 Payee name Imboden, Anne
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6 Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W Lake Ave Baltimore, MD 21210
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name Imboden, Anne
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Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W Lake Ave Baltimore, MD 21210
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name Imboden, Anne
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Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W Lake Ave Baltimore, MD 21210
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/15 Rpt:	2 FILER NAME Flip Texas Blue Fund	3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/10/2024	5 Payee name Imboden, Anne	
6 Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W Lake Ave Baltimore, MD 21210	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name Imboden, Anne	
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W Lake Ave Baltimore, MD 21210	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name Imboden, Anne	
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W Lake Ave Baltimore, MD 21210	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/15 Rpt:	2 FILER NAME Flip Texas Blue Fund	3 Filer ID (Ethics Commission Filers) 00088701
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4 Date 11/10/2024	5 Payee name Imboden, Anne
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6 Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W Lake Ave Baltimore, MD 21210
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name Imboden, Anne
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Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W Lake Ave Baltimore, MD 21210
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name Innenberg, Roberta
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Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 19532 Hanely st Apple Valley, CA 92308
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/15 Rpt:	2 FILER NAME Flip Texas Blue Fund	3 Filer ID (Ethics Commission Filers) 00088701
4 Date 11/04/2024	5 Payee name Jonathan Gracia for State Representative	
6 Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1119 W. Van Buren Harlingen, TX 78550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name McLeod, Laurel	
Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4 Commons Road Colorado Springs, CO 80904	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name Neale, Lucy	
Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3525 Alabama St San Diego, CA 92104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/15 Rpt:	2 FILER NAME Flip Texas Blue Fund	3 Filer ID (Ethics Commission Filers) 00088701
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4 Date 11/03/2024	5 Payee name Norris, Patricia
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6 Amount (\$) \$1.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1000 Miller Ave Red Oak, IA 51566
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name Norris, Patricia
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Amount (\$) \$1.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1000 Miller Ave Red Oak, IA 51566
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/13/2024	Payee name Organize to Win PAC
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Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 667238 Houston, TX 77266
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/15 Rpt:	2 FILER NAME Flip Texas Blue Fund	3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/31/2024	5 Payee name Plue, Rosemary	
6 Amount (\$) \$12.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 17042 Empanada Place Encino, CA 91436	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name Pm, MVP	
Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1653 The Fairway, Suite 205 Jenkintown, PA 19046	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2024	Payee name Texas House Democratic Campaign Committee	
Amount (\$) \$30,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 300095 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/15 Rpt:	2 FILER NAME Flip Texas Blue Fund	3 Filer ID (Ethics Commission Filers) 00088701
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4 Date 12/17/2024	5 Payee name Texas House Democratic Campaign Committee
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6 Amount (\$) \$27,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 300095 Austin, TX 78703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/29/2024	Payee name Van Ness Creative Strategies
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Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code One Huntington Quadrangle Ste 3N05 Melville, NY 11747
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Fundrasing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/15/2024	Payee name Van Ness Creative Strategies
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Amount (\$) \$29,986.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code One Huntington Quadrangle Ste 3N05 Melville, NY 11747
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Fundrasing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/15 Rpt:	2 FILER NAME Flip Texas Blue Fund	3 Filer ID (Ethics Commission Filers) 00088701
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4 Date 11/15/2024	5 Payee name Van Ness Creative Strategies
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6 Amount (\$) \$44,431.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code One Huntington Quadrangle Ste 3N05 Melville, NY 11747
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Fundrasing
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/16/2024	Payee name Van Ness Creative Strategies
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Amount (\$) \$12,482.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code One Huntington Quadrangle Ste 3N05 Melville, NY 11747
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Fundrasing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/16/2024	Payee name Van Ness Creative Strategies
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Amount (\$) \$13,154.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code One Huntington Quadrangle Ste 3N05 Melville, NY 11747
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Fundrasing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/15 Rpt:	2 FILER NAME Flip Texas Blue Fund	3 Filer ID (Ethics Commission Filers) 00088701
4 Date 12/31/2024	5 Payee name Weston, David	
6 Amount (\$) \$12.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4500 Windsong st Sacramento, CA 95834	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refunded Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held