

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00082985	<b>2</b> Total pages filed: 82
<b>3</b> COMMITTEE NAME Cambio Texas PAC		<b>OFFICE USE ONLY</b> Date Received ELECTRONICALLY FILED 01/15/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
<b>4</b> COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 135 Paseo Del Prado, STE 62 Edinburg, TX 78539		
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Abel I. NICKNAME LAST Prado	MI SUFFIX	
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 135 Paseo Del Prado Ste. 62 Edinburg, TX 78537		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 135 Paseo Del Prado Ste. 62 Edinburg, TX 78537		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 330-7552		
<b>9</b> REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
<b>10</b> PERIOD COVERED	Month Day Year      THROUGH      Month Day Year 10/27/2024      12/31/2024		
<b>11</b> ELECTION	ELECTION DATE Month Day Year 11/05/2024	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

**GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Cambio Texas PAC	<b>13 Filer ID</b> (Ethics Commission Filers) 00082985
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Jonathan Gracia State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 20,039.29
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 28,596.30
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 18,397.77
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 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.

Abel I. Prado  
\_\_\_\_\_  
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**

<b>17 COMMITTEE NAME</b> Cambio Texas PAC		<b>18 Filer ID</b> 00082985	(Ethics Commission Filers)
<b>19 SCHEDULE SUBTOTALS</b>			<b>SUBTOTAL AMOUNT</b>
	<b>NAME OF SCHEDULE</b>		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	20,039.29
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	\$	28,596.30
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**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 1/53 Rpt: 4/82
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adam, Cederblom	7 Amount of Contribution (\$)  \$3.12
	6 Contributor address; City; State; Zip Code  Fair Oaks, CA 95628	
8 Principal occupation / Job title (See Instructions) Civil servant		9 Employer (See Instructions) Franchise Tax Board
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adam, Cederblom	Amount of Contribution (\$)  \$3.12
	Contributor address; City; State; Zip Code  Fair Oaks, CA 95628	
Principal occupation / Job title (See Instructions) Civil servant		Employer (See Instructions) Franchise Tax Board
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adam, Cotner	Amount of Contribution (\$)  \$3.13
	Contributor address; City; State; Zip Code  Columbus, OH 43215	
Principal occupation / Job title (See Instructions) Software Engineering		Employer (See Instructions) Fusion Alliance
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adam, Cotner	Amount of Contribution (\$)  \$3.13
	Contributor address; City; State; Zip Code  Columbus, OH 43215	
Principal occupation / Job title (See Instructions) Software Engineering		Employer (See Instructions) Fusion Alliance
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adam, Cotner	Amount of Contribution (\$)  \$3.13
	Contributor address; City; State; Zip Code  Columbus, OH 43215	
Principal occupation / Job title (See Instructions) Software Engineering		Employer (See Instructions) Fusion Alliance

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/53 Rpt: 5/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adam, Pacchiana <hr/> <b>6</b> Contributor address; City; State; Zip Code  Sandy Hook, CT 06482	<b>7</b> Amount of Contribution (\$)  \$2.27
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adam, Pacchiana <hr/> Contributor address; City; State; Zip Code  Sandy Hook, CT 06482	Amount of Contribution (\$)  \$2.27
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#: _____ ) Alex, Marcellesi <hr/> Contributor address; City; State; Zip Code  Alexandria, VA 22314	Amount of Contribution (\$)  \$5.56
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Gibson Dunn & Crutcher LLP
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alex, Marcellesi <hr/> Contributor address; City; State; Zip Code  Alexandria, VA 22314	Amount of Contribution (\$)  \$5.56
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Gibson Dunn & Crutcher LLP
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alistair, Ballantine <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11201	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Spotify

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/53 Rpt: 6/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alistair, Ballantine <hr/> <b>6</b> Contributor address; City; State; Zip Code  Brooklyn, NY 11201	<b>7</b> Amount of Contribution (\$)  \$2.78
<b>8</b> Principal occupation / Job title (See Instructions) Software Engineer		<b>9</b> Employer (See Instructions) Spotify
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allan, Trautman <hr/> Contributor address; City; State; Zip Code  Santa Clarita, CA 91350	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Puppeteer		Employer (See Instructions) Self
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allan, Trautman <hr/> Contributor address; City; State; Zip Code  Santa Clarita, CA 91350	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Puppeteer		Employer (See Instructions) Self
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allison, Liljestrom <hr/> Contributor address; City; State; Zip Code  Jackson, WY 83002	Amount of Contribution (\$)  \$1.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allison, Liljestrom <hr/> Contributor address; City; State; Zip Code  Jackson, WY 83002	Amount of Contribution (\$)  \$1.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/53 Rpt: 7/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allyson, Stauffer <hr/> <b>6</b> Contributor address; City; State; Zip Code  Longmont, CO 80501	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Lyft Driver		<b>9</b> Employer (See Instructions) Myself
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allyson, Stauffer <hr/> Contributor address; City; State; Zip Code  Longmont, CO 80501	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Lyft Driver		Employer (See Instructions) Myself
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Andrew, Stewart <hr/> Contributor address; City; State; Zip Code  Pullman, WA 99163	Amount of Contribution (\$)  \$2.09
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#: _____ ) Andrew, Stewart <hr/> Contributor address; City; State; Zip Code  Pullman, WA 99163	Amount of Contribution (\$)  \$2.09
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#: _____ ) Andrew, Stewart <hr/> Contributor address; City; State; Zip Code  Pullman, WA 99163	Amount of Contribution (\$)  \$2.09
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/53 Rpt: 8/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anthony, Gratter <hr/> <b>6</b> Contributor address; City; State; Zip Code  Wilkes-Barre, PA 18705	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Brewery Sales Representative		<b>9</b> Employer (See Instructions) Wallenpaupack Brewing Co
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anthony, Gratter <hr/> Contributor address; City; State; Zip Code  Wilkes-Barre, PA 18705	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Brewery Sales Representative		Employer (See Instructions) Wallenpaupack Brewing Co
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Augusta, Butlin <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98105	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Biz+dev		Employer (See Instructions) Valve
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Augusta, Butlin <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98105	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Biz+dev		Employer (See Instructions) Valve
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Avi, Lipton <hr/> Contributor address; City; State; Zip Code  Boston, MA 02134	Amount of Contribution (\$)  \$5.40
Principal occupation / Job title (See Instructions) Phd Student		Employer (See Instructions) Harvard University



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/53 Rpt: 9/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Avi, Lipton <hr/> <b>6</b> Contributor address; City; State; Zip Code  Boston, MA 02134	<b>7</b> Amount of Contribution (\$) <span style="float:right">\$5.40</span>
<b>8</b> Principal occupation / Job title (See Instructions) Phd Student		<b>9</b> Employer (See Instructions) Harvard University
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barbara, Chandler <hr/> Contributor address; City; State; Zip Code  Deerfield, IL 60015	Amount of Contribution (\$) <span style="float:right">\$3.12</span>
Principal occupation / Job title (See Instructions) Non Profit		Employer (See Instructions) JCFS
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barbara, Chandler <hr/> Contributor address; City; State; Zip Code  Deerfield, IL 60015	Amount of Contribution (\$) <span style="float:right">\$3.12</span>
Principal occupation / Job title (See Instructions) Non Profit		Employer (See Instructions) JCFS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bonnie, Gilson <hr/> Contributor address; City; State; Zip Code  Rockport, TX 78382	Amount of Contribution (\$) <span style="float:right">\$3.12</span>
Principal occupation / Job title (See Instructions) Volunteer Director		Employer (See Instructions) Capital City Village
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bonnie, Gilson <hr/> Contributor address; City; State; Zip Code  Rockport, TX 78382	Amount of Contribution (\$) <span style="float:right">\$3.12</span>
Principal occupation / Job title (See Instructions) Volunteer Director		Employer (See Instructions) Capital City Village

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/53 Rpt: 10/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/29/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bonnie, Gilson <hr/> <b>6</b> Contributor address; City; State; Zip Code  Rockport, TX 78382	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Volunteer Director		<b>9</b> Employer (See Instructions) Capital City Village
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brian, Pappalardo <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72202	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Pappalardo Media Co
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brian, Pappalardo <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72202	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Pappalardo Media Co
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brittany, Rolf <hr/> Contributor address; City; State; Zip Code  Towson, MD 21286	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) RK&K
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brittany, Rolf <hr/> Contributor address; City; State; Zip Code  Towson, MD 21286	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) RK&K

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/53 Rpt: 11/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bruce, Yandell <hr/> <b>6</b> Contributor address; City; State; Zip Code  Rocklin, CA 95765	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Cubizm
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bruce, Yandell <hr/> Contributor address; City; State; Zip Code  Rocklin, CA 95765	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Cubizm
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Caity, Yates <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94115	Amount of Contribution (\$)  \$2.86
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#: _____ ) Caity, Yates <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94115	Amount of Contribution (\$)  \$2.86
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#: _____ ) Carl, Schierhorn <hr/> Contributor address; City; State; Zip Code  Kent, OH 44240	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/53 Rpt: 12/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carl, Schierhorn	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Kent, OH 44240		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carole, Courtney	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  San Marcos, TX 78666		
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#: _____ ) Carole, Courtney	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  San Marcos, TX 78666		
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#: _____ ) Caroline, Delaney	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code  Dayville, CT 06241		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Caroline, Delaney	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code  Dayville, CT 06241		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/53 Rpt: 13/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlie, Rockman	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>6</b> Contributor address; City; State; Zip Code  Portland, OR 97213		
<b>8</b> Principal occupation / Job title (See Instructions) Operational Strategy		<b>9</b> Employer (See Instructions) Self
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlie, Rockman	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Portland, OR 97213		
Principal occupation / Job title (See Instructions) Operational Strategy		Employer (See Instructions) Self
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris, Barton	Amount of Contribution (\$)  \$5.04
Contributor address; City; State; Zip Code  Austin, TX 78757		
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris, Barton	Amount of Contribution (\$)  \$5.04
Contributor address; City; State; Zip Code  Austin, TX 78757		
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher, Redgate	Amount of Contribution (\$)  \$1.25
Contributor address; City; State; Zip Code  Los Angeles, CA 90807		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Los Angeles County

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/53 Rpt: 14/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher, Redgate <hr/> <b>6</b> Contributor address; City; State; Zip Code  Los Angeles, CA 90807	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Los Angeles County
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connie, Ryan <hr/> Contributor address; City; State; Zip Code  Brightwood, OR 97011	Amount of Contribution (\$)  \$15.00
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#: _____) Connie, Ryan <hr/> Contributor address; City; State; Zip Code  Brightwood, OR 97011	Amount of Contribution (\$)  \$15.00
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#: _____) Connor, Byers <hr/> Contributor address; City; State; Zip Code  Woodinville, WA 98072	Amount of Contribution (\$)  \$2.22
Principal occupation / Job title (See Instructions) AP Clerk		Employer (See Instructions) Manson Construction Co.
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connor, Byers <hr/> Contributor address; City; State; Zip Code  Woodinville, WA 98072	Amount of Contribution (\$)  \$2.22
Principal occupation / Job title (See Instructions) AP Clerk		Employer (See Instructions) Manson Construction Co.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/53 Rpt: 15/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dale, Bronstein <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76112	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Wine Merchant		<b>9</b> Employer (See Instructions) Mr.
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daniel, McCabe <hr/> Contributor address; City; State; Zip Code  Edina, MN 55436	Amount of Contribution (\$)  \$1.11
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Minnesota
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) David, Allegoren <hr/> Contributor address; City; State; Zip Code  Davis, CA 95618	Amount of Contribution (\$)  \$12.50
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#: _____ ) David, Breitenbuecher <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) Farmers Business Network
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) David, Breitenbuecher <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) Farmers Business Network

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/53 Rpt: 16/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) David, Cofrin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Atlanta, GA 30306	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) David, Mangiamele <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11226	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Client Services Specialist		Employer (See Instructions) SeatGeek
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) David, Mangiamele <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11226	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions) Client Services Specialist		Employer (See Instructions) SeatGeek
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) David, Schenck <hr/> Contributor address; City; State; Zip Code  Huntington Beach, CA 92648	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CDI
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) David, Schenck <hr/> Contributor address; City; State; Zip Code  Huntington Beach, CA 92648	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CDI



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/53 Rpt: 17/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Williams	<b>7</b> Amount of Contribution (\$) \$2.50
<b>6</b> Contributor address; City; State; Zip Code  Chandler, AZ 85224		
<b>8</b> Principal occupation / Job title (See Instructions) Program Manager		<b>9</b> Employer (See Instructions) Honeywell
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Williams	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code  Chandler, AZ 85224		
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Honeywell
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delia, C Burns	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code  Pleasanton, CA 94566		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) United Nations
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delia, C Burns	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code  Pleasanton, CA 94566		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) United Nations
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doug, Wheaton	Amount of Contribution (\$) \$6.87
Contributor address; City; State; Zip Code  Mountain View, CA 94043		
Principal occupation / Job title (See Instructions) Se		Employer (See Instructions) Attunity

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/53 Rpt: 18/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doug, Wheaton <hr/> <b>6</b> Contributor address; City; State; Zip Code  Mountain View, CA 94043	<b>7</b> Amount of Contribution (\$)  \$6.87
<b>8</b> Principal occupation / Job title (See Instructions) Se		<b>9</b> Employer (See Instructions) Attunity
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elizabeth, Townsend <hr/> Contributor address; City; State; Zip Code  Reading, MA 01867	Amount of Contribution (\$)  \$1.66
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Kronos Bio
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elizabeth, Townsend <hr/> Contributor address; City; State; Zip Code  Reading, MA 01867	Amount of Contribution (\$)  \$1.66
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Kronos Bio
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elvira, Hernandez <hr/> Contributor address; City; State; Zip Code  Donna, TX 78537	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) LGBS
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Emily, Burrows <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37206	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bass Berry & Sims

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/53 Rpt: 19/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Emily, Burrows <hr/> <b>6</b> Contributor address; City; State; Zip Code  Nashville, TN 37206	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Bass Berry & Sims
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Emily, Petrichor <hr/> Contributor address; City; State; Zip Code  Crownsville, MD 21032	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Horse Trainer		Employer (See Instructions) self employed
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Emily, Petrichor <hr/> Contributor address; City; State; Zip Code  Crownsville, MD 21032	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Horse Trainer		Employer (See Instructions) self employed
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Emily, Waugh <hr/> Contributor address; City; State; Zip Code  Milwaukie, OR 97222	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Emily, Waugh <hr/> Contributor address; City; State; Zip Code  Milwaukie, OR 97222	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/53 Rpt: 20/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eric, Anderson <hr/> <b>6</b> Contributor address; City; State; Zip Code  Seattle, WA 98103	<b>7</b> Amount of Contribution (\$)  \$2.78
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eric, Anderson <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98103	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eric, Anderson <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98103	Amount of Contribution (\$)  \$2.78
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#: _____ ) Eric, Anderson <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98103	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fran, Mayfield <hr/> Contributor address; City; State; Zip Code  Farmington, NM 87401-8629	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/53 Rpt: 21/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fran, Mayfield	<b>7</b> Amount of Contribution (\$)  \$2.78
<b>6</b> Contributor address; City; State; Zip Code  Farmington, NM 87401-8629		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frances, Burgess	Amount of Contribution (\$)  \$1.88
Contributor address; City; State; Zip Code  berkeley, CA 94707		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frances, Burgess	Amount of Contribution (\$)  \$1.88
Contributor address; City; State; Zip Code  berkeley, CA 94707		
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#: _____ ) Frances, Prevas	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Lawndale, CA 90260		
Principal occupation / Job title (See Instructions) computer consultant		Employer (See Instructions) Prosum Inc.
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frances, Prevas	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Lawndale, CA 90260		
Principal occupation / Job title (See Instructions) computer consultant		Employer (See Instructions) Prosum Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/53 Rpt: 22/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Hall	<b>7</b> Amount of Contribution (\$)  \$3.13
<b>6</b> Contributor address; City; State; Zip Code  Issaquah, WA 98029		
<b>8</b> Principal occupation / Job title (See Instructions) Manager		<b>9</b> Employer (See Instructions) Self
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Hall	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  Issaquah, WA 98029		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Self
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grant, Klein	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  Denver, CO 80223		
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Prologis
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grant, Klein	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  Denver, CO 80223		
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Prologis
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg, Davidson	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Redondo Beach, CA 90278		
Principal occupation / Job title (See Instructions) Aerospace manager		Employer (See Instructions) Northrop Grumman

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/53 Rpt: 23/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/24/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greg, Joyce	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>6</b> Contributor address; City; State; Zip Code  South Boston, MA 02127		
<b>8</b> Principal occupation / Job title (See Instructions) Financial Analyst		<b>9</b> Employer (See Instructions) Akamai Technologies
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greg, Joyce	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  South Boston, MA 02127		
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Akamai Technologies
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Halley, Smith	Amount of Contribution (\$)  \$2.09
Contributor address; City; State; Zip Code  Indianapolis, IN 46202		
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Digitas
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Halley, Smith	Amount of Contribution (\$)  \$2.09
Contributor address; City; State; Zip Code  Indianapolis, IN 46202		
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Digitas
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Heather, Blanchard	Amount of Contribution (\$)  \$2.78
Contributor address; City; State; Zip Code  Abington, MA 02351		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Your Part-Time Controller

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/53 Rpt: 24/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heather, Blanchard	<b>7</b> Amount of Contribution (\$)  \$2.78
<b>6</b> Contributor address; City; State; Zip Code  Abington, MA 02351		
<b>8</b> Principal occupation / Job title (See Instructions) Accountant		<b>9</b> Employer (See Instructions) Your Part-Time Controller
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heather, Werner	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  San Diego, CA 92103		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heather, Werner	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  San Diego, CA 92103		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston In Action	Amount of Contribution (\$)  \$18,557.18
Contributor address; City; State; Zip Code  TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hugh, Franck	Amount of Contribution (\$)  \$3.57
Contributor address; City; State; Zip Code  Gainesville, FL 32608		
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Department of Veterans Affairs



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/53 Rpt: 25/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hugh, Franck <hr/> <b>6</b> Contributor address; City; State; Zip Code  Gainesville, FL 32608	<b>7</b> Amount of Contribution (\$)  \$3.57
<b>8</b> Principal occupation / Job title (See Instructions) Pharmacist		<b>9</b> Employer (See Instructions) Department of Veterans Affairs
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) lan, Tims <hr/> Contributor address; City; State; Zip Code  Plymouth, MI 48170	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Ford Motor Company
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) lan, Tims <hr/> Contributor address; City; State; Zip Code  Plymouth, MI 48170	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Ford Motor Company
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) lta, Kane <hr/> Contributor address; City; State; Zip Code  Boston, MA 02127	Amount of Contribution (\$)  \$2.86
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) conformis
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) lta, Kane <hr/> Contributor address; City; State; Zip Code  Boston, MA 02127	Amount of Contribution (\$)  \$2.86
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) conformis

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/53 Rpt: 26/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Hill	<b>7</b> Amount of Contribution (\$)  \$1.87
<b>6</b> Contributor address; City; State; Zip Code  Belmont 02280 Peru		
<b>8</b> Principal occupation / Job title (See Instructions) Sales Management		<b>9</b> Employer (See Instructions) BD
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Hill	Amount of Contribution (\$)  \$1.87
Contributor address; City; State; Zip Code  Belmont 02280 Peru		
Principal occupation / Job title (See Instructions) Sales Management		Employer (See Instructions) BD
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Scotland	Amount of Contribution (\$)  \$1.24
Contributor address; City; State; Zip Code  Tucson, AZ 75750		
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Newmark
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Scotland	Amount of Contribution (\$)  \$1.24
Contributor address; City; State; Zip Code  Tucson, AZ 75750		
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions) Newmark
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jan, Lapp	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Minnetonka, MN 55305		
Principal occupation / Job title (See Instructions) Administrative Asst.		Employer (See Instructions) Winthrop & Weinstine

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/53 Rpt: 27/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jane, Malin	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77062		
<b>8</b> Principal occupation / Job title (See Instructions) Expert Consultant		<b>9</b> Employer (See Instructions) self
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jane, Malin	Amount of Contribution (\$)  \$15.00
Contributor address; City; State; Zip Code  Houston, TX 77062		
Principal occupation / Job title (See Instructions) Expert Consultant		Employer (See Instructions) self
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jane, Malin	Amount of Contribution (\$)  \$15.00
Contributor address; City; State; Zip Code  Houston, TX 77062		
Principal occupation / Job title (See Instructions) Expert Consultant		Employer (See Instructions) self
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Janelle, Maddock	Amount of Contribution (\$)  \$2.00
Contributor address; City; State; Zip Code  Kissimmee, FL 34741		
Principal occupation / Job title (See Instructions) System Analyst		Employer (See Instructions) Disney Cruise Line
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Janelle, Maddock	Amount of Contribution (\$)  \$2.00
Contributor address; City; State; Zip Code  Kissimmee, FL 34741		
Principal occupation / Job title (See Instructions) System Analyst		Employer (See Instructions) Disney Cruise Line

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 25/53 Rpt: 28/82
2 FILER NAME Cambio Texas PAC		3 Filer ID (Ethics Commission Filers) 00082985
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jared, Veal	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code  Addis, LA 70710	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jared, Veal	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Addis, LA 70710	
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#: _____ ) Jeff, Donath	Amount of Contribution (\$) \$3.12
	Contributor address; City; State; Zip Code  Walnut, CA 91789	
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) SCPMG
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jeff, Donath	Amount of Contribution (\$) \$3.12
	Contributor address; City; State; Zip Code  Walnut, CA 91789	
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) SCPMG
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jennifer, Mahdavi	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code  Santa Rosa, CA 95405	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) CSU

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/53 Rpt: 29/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jennifer, Mahdavi <hr/> <b>6</b> Contributor address; City; State; Zip Code  Santa Rosa, CA 95405	<b>7</b> Amount of Contribution (\$)  \$3.00
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions) CSU
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jennifer, Wolfson <hr/> Contributor address; City; State; Zip Code  Northampton, MA 01060	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) ISO New Englad
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jennifer, Wolfson <hr/> Contributor address; City; State; Zip Code  Northampton, MA 01060	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) ISO New Englad
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jennifer, Wolfson <hr/> Contributor address; City; State; Zip Code  Northampton, MA 01060	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) ISO New Englad
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jim, Flint <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98115	Amount of Contribution (\$)  \$8.34
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/53 Rpt: 30/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joey, Kirsch <hr/> <b>6</b> Contributor address; City; State; Zip Code  West Orange, NJ 07052	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joey, Kirsch <hr/> Contributor address; City; State; Zip Code  West Orange, NJ 07052	Amount of Contribution (\$)  \$2.00
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#: _____ ) Jon, Edwards <hr/> Contributor address; City; State; Zip Code  South Freeport, ME 04078	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jonathon, Laureano <hr/> Contributor address; City; State; Zip Code  North Plainfield, NJ 07062	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) MLB Network
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jonathon, Laureano <hr/> Contributor address; City; State; Zip Code  North Plainfield, NJ 07062	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) MLB Network

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/53 Rpt: 31/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joseph, Harrington	<b>7</b> Amount of Contribution (\$) \$4.55
<b>6</b> Contributor address; City; State; Zip Code  San Diego, CA 92102		
<b>8</b> Principal occupation / Job title (See Instructions) Project Manager		<b>9</b> Employer (See Instructions) Foresight Sports
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joseph, Harrington	Amount of Contribution (\$) \$4.55
Contributor address; City; State; Zip Code  San Diego, CA 92102		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Foresight Sports
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Justin, Baugus	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code  Phoenix, AZ 85037		
Principal occupation / Job title (See Instructions) Audio Video Lights Production		Employer (See Instructions) Christ's Church of the Valley
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Justin, Baugus	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code  Phoenix, AZ 85037		
Principal occupation / Job title (See Instructions) Audio Video Lights Production		Employer (See Instructions) Christ's Church of the Valley
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kara, Aguilar	Amount of Contribution (\$) \$1.43
Contributor address; City; State; Zip Code  Tulsa, OK 74105		
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Cvent

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/53 Rpt: 32/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kara, Aguilar <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tulsa, OK 74105	<b>7</b> Amount of Contribution (\$)  \$1.43
<b>8</b> Principal occupation / Job title (See Instructions) Analyst		<b>9</b> Employer (See Instructions) Cvent
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karen, Rahn <hr/> Contributor address; City; State; Zip Code  MARION, VA 24354	Amount of Contribution (\$)  \$3.58
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#: _____ ) Katherine, Reymann <hr/> Contributor address; City; State; Zip Code  Salt Lake City, UT 84108	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator		Employer (See Instructions) League of Women Voters - SLC
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Katherine, Reymann <hr/> Contributor address; City; State; Zip Code  Salt Lake City, UT 84108	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator		Employer (See Instructions) League of Women Voters - SLC
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Katherine, Reymann <hr/> Contributor address; City; State; Zip Code  Salt Lake City, UT 84108	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Naturalization Voter Registration Coordinator		Employer (See Instructions) League of Women Voters - SLC



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/53 Rpt: 33/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kathryn, Bernstein	<b>7</b> Amount of Contribution (\$) \$1.25
	<b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60610	
<b>8</b> Principal occupation / Job title (See Instructions) Public Health Nutrition		<b>9</b> Employer (See Instructions) Illinois Public Health Institute
<b>Date</b> 11/30/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kathryn, Bernstein	<b>Amount of Contribution (\$)</b> \$1.25
	<b>Contributor address; City; State; Zip Code</b>  Chicago, IL 60610	
<b>Principal occupation / Job title (See Instructions)</b> Public Health Nutrition		<b>Employer (See Instructions)</b> Illinois Public Health Institute
<b>Date</b> 12/30/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kathryn, Bernstein	<b>Amount of Contribution (\$)</b> \$1.25
	<b>Contributor address; City; State; Zip Code</b>  Chicago, IL 60610	
<b>Principal occupation / Job title (See Instructions)</b> Public Health Nutrition		<b>Employer (See Instructions)</b> Illinois Public Health Institute
<b>Date</b> 11/26/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kathy, Johns	<b>Amount of Contribution (\$)</b> \$1.00
	<b>Contributor address; City; State; Zip Code</b>  Littleton, CO 80125	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 12/26/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kathy, Johns	<b>Amount of Contribution (\$)</b> \$1.00
	<b>Contributor address; City; State; Zip Code</b>  Littleton, CO 80125	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/53 Rpt: 34/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Katy, Endo <hr/> <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75093	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Marketing		<b>9</b> Employer (See Instructions) Keurig Dr Pepper
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelly, Mulcahy-Libel <hr/> Contributor address; City; State; Zip Code  Des Plaines, IL 60018	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelly, Mulcahy-Libel <hr/> Contributor address; City; State; Zip Code  Des Plaines, IL 60018	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelly, Mulcahy-Libel <hr/> Contributor address; City; State; Zip Code  Des Plaines, IL 60018	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kellyn, Young <hr/> Contributor address; City; State; Zip Code  Lawrence, KS 66049	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Medical Coder		Employer (See Instructions) Baylor Scott and White

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/53 Rpt: 35/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kellyn, Young <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lawrence, KS 66049	<b>7</b> Amount of Contribution (\$)  \$1.43
<b>8</b> Principal occupation / Job title (See Instructions) Medical Coder		<b>9</b> Employer (See Instructions) Baylor Scott and White
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kenneth, Brubaker <hr/> Contributor address; City; State; Zip Code  White Settlement, TX 76108	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Material Handler		Employer (See Instructions) Ryder
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kenneth, Brubaker <hr/> Contributor address; City; State; Zip Code  White Settlement, TX 76108	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Material Handler		Employer (See Instructions) Ryder
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laura, Erskine <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90034	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UCLA
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laura, Erskine <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90034	Amount of Contribution (\$)  \$2.78
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UCLA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/53 Rpt: 36/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lilach, Mendelovich	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>6</b> Contributor address; City; State; Zip Code  Valley Village, CA 91607		
<b>8</b> Principal occupation / Job title (See Instructions) Actor		<b>9</b> Employer (See Instructions) Self
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Madeline, Riley	Amount of Contribution (\$)  \$2.86
Contributor address; City; State; Zip Code  Washington, DC 20009		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Reingold
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Madeline, Riley	Amount of Contribution (\$)  \$2.86
Contributor address; City; State; Zip Code  Washington, DC 20009		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Reingold
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marji, Zintz	Amount of Contribution (\$)  \$1.25
Contributor address; City; State; Zip Code  Olivebridge, NY 12461		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marji, Zintz	Amount of Contribution (\$)  \$1.25
Contributor address; City; State; Zip Code  Olivebridge, NY 12461		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/53 Rpt: 37/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MaryBeth, English <hr/> <b>6</b> Contributor address; City; State; Zip Code  Haines City, FL 33844	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) PCSB
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MaryBeth, English <hr/> Contributor address; City; State; Zip Code  Haines City, FL 33844	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PCSB
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Matthew, Edmond <hr/> Contributor address; City; State; Zip Code  Boise, ID 83702	Amount of Contribution (\$)  \$2.08
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) Ada County Highway District
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Matthew, Edmond <hr/> Contributor address; City; State; Zip Code  Boise, ID 83702	Amount of Contribution (\$)  \$2.08
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) Ada County Highway District
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Matthew, Sumner <hr/> Contributor address; City; State; Zip Code  Wynnewood, PA 19006	Amount of Contribution (\$)  \$1.75
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Messari

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/53 Rpt: 38/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthew, Sumner	<b>7</b> Amount of Contribution (\$)  \$1.75
<b>6</b> Contributor address; City; State; Zip Code  Wynnewood, PA 19006		
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) Messari
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthew, Virgen	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  San Diego, CA 92126		
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) General Atomics
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthew, Virgen	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  San Diego, CA 92126		
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) General Atomics
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauna, Arnzen	Amount of Contribution (\$)  \$3.88
Contributor address; City; State; Zip Code  San Francisco, CA 94104		
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions) Tarlson & Associates
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauna, Arnzen	Amount of Contribution (\$)  \$3.88
Contributor address; City; State; Zip Code  San Francisco, CA 94104		
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions) Tarlson & Associates

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/53 Rpt: 39/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Max, Yancy	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78765		
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Plum Creek Records & Tapes
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Max, Yancy	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Austin, TX 78765		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Plum Creek Records & Tapes
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Michael, Lucas	Amount of Contribution (\$)  \$11.11
Contributor address; City; State; Zip Code  Buda, TX 78610		
Principal occupation / Job title (See Instructions) Solution engineer		Employer (See Instructions) Salesforce
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Michele, Solberg	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78745		
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) University of Texas at Austin
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Michelle and Ryan, Nall	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Gainesville, FL 32601		
Principal occupation / Job title (See Instructions) ARNP		Employer (See Instructions) UF

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/53 Rpt: 40/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Misty, Haisfield <hr/> <b>6</b> Contributor address; City; State; Zip Code  Thornton, CO 80241	<b>7</b> Amount of Contribution (\$) <span style="float:right">\$3.57</span>
<b>8</b> Principal occupation / Job title (See Instructions) Accountant		<b>9</b> Employer (See Instructions) Medtronic
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Misty, Haisfield <hr/> Contributor address; City; State; Zip Code  Thornton, CO 80241	Amount of Contribution (\$) <span style="float:right">\$3.57</span>
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Medtronic
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Naomi, Tsuneyoshi <hr/> Contributor address; City; State; Zip Code  Kalaheo, HI 96741	Amount of Contribution (\$) <span style="float:right">\$3.57</span>
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Naomi, Tsuneyoshi <hr/> Contributor address; City; State; Zip Code  Kalaheo, HI 96741	Amount of Contribution (\$) <span style="float:right">\$3.57</span>
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#: _____ ) Neal, Fine <hr/> Contributor address; City; State; Zip Code  North Kingstown, RI 02852	Amount of Contribution (\$) <span style="float:right">\$3.12</span>
Principal occupation / Job title (See Instructions) Lead Scientist		Employer (See Instructions) Navatek Ltd



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/53 Rpt: 41/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/22/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Neal, Fine	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>6</b> Contributor address; City; State; Zip Code  North Kingstown, RI 02852		
<b>8</b> Principal occupation / Job title (See Instructions) Lead Scientist		<b>9</b> Employer (See Instructions) Navatek Ltd
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Onofre Antonio, Abarca	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Oakland, CA 94601		
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#: _____ ) Onofre Antonio, Abarca	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Oakland, CA 94601		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pamela, Palumbo	Amount of Contribution (\$)  \$1.43
Contributor address; City; State; Zip Code  Lake Clear, NY 12945		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pamela, Palumbo	Amount of Contribution (\$)  \$1.43
Contributor address; City; State; Zip Code  Lake Clear, NY 12945		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/53 Rpt: 42/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patrice, Levinson <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fairfax, VA 22032	<b>7</b> Amount of Contribution (\$)  \$1.43
<b>8</b> Principal occupation / Job title (See Instructions) Nurse Practitioner		<b>9</b> Employer (See Instructions) George Mason University
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patrice, Levinson <hr/> Contributor address; City; State; Zip Code  Fairfax, VA 22032	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) George Mason University
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patrick, Miller <hr/> Contributor address; City; State; Zip Code  Cheney, WA 99004	Amount of Contribution (\$)  \$2.08
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#: _____ ) Patrick, Miller <hr/> Contributor address; City; State; Zip Code  Cheney, WA 99004	Amount of Contribution (\$)  \$2.08
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patrick, Miller <hr/> Contributor address; City; State; Zip Code  Cheney, WA 99004	Amount of Contribution (\$)  \$2.08
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/53 Rpt: 43/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul, Lahm	<b>7</b> Amount of Contribution (\$) <span style="float: right;">\$1.25</span>
<b>6</b> Contributor address; City; State; Zip Code  West Chester, PA 19380		
<b>8</b> Principal occupation / Job title (See Instructions) Software QA Manager		<b>9</b> Employer (See Instructions) Scoir Inc
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul, Lahm	Amount of Contribution (\$) <span style="float: right;">\$1.25</span>
Contributor address; City; State; Zip Code  West Chester, PA 19380		
Principal occupation / Job title (See Instructions) Software QA Manager		Employer (See Instructions) Scoir Inc
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philip, Graff	Amount of Contribution (\$) <span style="float: right;">\$3.12</span>
Contributor address; City; State; Zip Code  Fulton, MD 20759		
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) JHU APL
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philip, Graff	Amount of Contribution (\$) <span style="float: right;">\$3.12</span>
Contributor address; City; State; Zip Code  Fulton, MD 20759		
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) JHU APL
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polly, Hauser	Amount of Contribution (\$) <span style="float: right;">\$3.12</span>
Contributor address; City; State; Zip Code  Dubuque, IA 52001		
Principal occupation / Job title (See Instructions) Financial advisor		Employer (See Instructions) DB&T

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/53 Rpt: 44/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Polly, Hauser	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>6</b> Contributor address; City; State; Zip Code  Dubuque, IA 52001		
<b>8</b> Principal occupation / Job title (See Instructions) Financial advisor		<b>9</b> Employer (See Instructions) DB&T
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rachel, Neurohr	Amount of Contribution (\$)  \$3.13
Contributor address; City; State; Zip Code  Washington, DC 20010-2192		
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) George Washington University
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rachel, Wiggans	Amount of Contribution (\$)  \$1.43
Contributor address; City; State; Zip Code  Houston, TX 77025		
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Texas Childrens Hospital
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ravindran, Rajaraman	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  morganville, NJ 07751		
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ravindran, Rajaraman	Amount of Contribution (\$)  \$7.15
Contributor address; City; State; Zip Code  morganville, NJ 07751		
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/53 Rpt: 45/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravindran, Rajaraman	<b>7</b> Amount of Contribution (\$) <span style="float:right">\$1.00</span>
<b>6</b> Contributor address; City; State; Zip Code  morganville, NJ 07751		
<b>8</b> Principal occupation / Job title (See Instructions) Doctor		<b>9</b> Employer (See Instructions) Self
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravindran, Rajaraman	Amount of Contribution (\$) <span style="float:right">\$7.15</span>
Contributor address; City; State; Zip Code  morganville, NJ 07751		
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravindran, Rajaraman	Amount of Contribution (\$) <span style="float:right">\$1.00</span>
Contributor address; City; State; Zip Code  morganville, NJ 07751		
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rebecca, Clive	Amount of Contribution (\$) <span style="float:right">\$1.25</span>
Contributor address; City; State; Zip Code  Ann Arbor, MI 48103		
Principal occupation / Job title (See Instructions) Research		Employer (See Instructions) Department of Veterans Affairs
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rebecca, Clive	Amount of Contribution (\$) <span style="float:right">\$1.25</span>
Contributor address; City; State; Zip Code  Ann Arbor, MI 48103		
Principal occupation / Job title (See Instructions) Research		Employer (See Instructions) Department of Veterans Affairs

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 43/53 Rpt: 46/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rebecca, Clive <hr/> <b>6</b> Contributor address; City; State; Zip Code  Ann Arbor, MI 48103	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions) Research		<b>9</b> Employer (See Instructions) Department of Veterans Affairs
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rita M, Haverkamp <hr/> Contributor address; City; State; Zip Code  El Cajon, CA 92020	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Rn		Employer (See Instructions) Self
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rita M, Haverkamp <hr/> Contributor address; City; State; Zip Code  El Cajon, CA 92020	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Rn		Employer (See Instructions) Self
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robert, Laudadio <hr/> Contributor address; City; State; Zip Code  Harrison, NJ 07029	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Cybersecurity Analyst		Employer (See Instructions) JP Morgan Chase
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robert, Laudadio <hr/> Contributor address; City; State; Zip Code  Harrison, NJ 07029	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Cybersecurity Analyst		Employer (See Instructions) JP Morgan Chase

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 44/53 Rpt: 47/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sara, Giusti <hr/> <b>6</b> Contributor address; City; State; Zip Code  Vashon, WA 98070	<b>7</b> Amount of Contribution (\$)  \$6.25
<b>8</b> Principal occupation / Job title (See Instructions) Ad tech		<b>9</b> Employer (See Instructions) ISpot.tv
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sara, Tiede <hr/> Contributor address; City; State; Zip Code  COLORADO SPRINGS, CO 80907	Amount of Contribution (\$)  \$3.13
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#: _____ ) Sara, Tiede <hr/> Contributor address; City; State; Zip Code  COLORADO SPRINGS, CO 80907	Amount of Contribution (\$)  \$3.13
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#: _____ ) Sean, McCann <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Zynga Inc
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sean, McCann <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$3.13
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Zynga Inc

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 45/53 Rpt: 48/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shanna, Nispel <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Jose, CA 95135	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shanna, Nispel <hr/> Contributor address; City; State; Zip Code  San Jose, CA 95135	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#: _____ ) Stuart, Roseman <hr/> Contributor address; City; State; Zip Code  Boston, MA 02116	Amount of Contribution (\$)  \$31.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) SaneBox
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stuart, Roseman <hr/> Contributor address; City; State; Zip Code  Boston, MA 02116	Amount of Contribution (\$)  \$31.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) SaneBox
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sue, Horan <hr/> Contributor address; City; State; Zip Code  Robbinsville, NJ 08690	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Director PV Systems		Employer (See Instructions) Acadia Pharmaceutical



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 46/53 Rpt: 49/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/19/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sue, Horan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Robbinsville, NJ 08690	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Director PV Systems		<b>9</b> Employer (See Instructions) Acadia Pharmaceutical
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sunita, Przewlocki <hr/> Contributor address; City; State; Zip Code  Hilo, HI 96720	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Realtor
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sunita, Przewlocki <hr/> Contributor address; City; State; Zip Code  Hilo, HI 96720	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Realtor
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sunita, Przewlocki <hr/> Contributor address; City; State; Zip Code  Hilo, HI 96720	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Realtor
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Susan, Burek <hr/> Contributor address; City; State; Zip Code  Austin, TX 78758	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 47/53 Rpt: 50/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Susan, Holstein	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>6</b> Contributor address; City; State; Zip Code  Everett, WA 98208		
<b>8</b> Principal occupation / Job title (See Instructions) Senior Management Analyst		<b>9</b> Employer (See Instructions) SSA
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Susan, Holstein	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Everett, WA 98208		
Principal occupation / Job title (See Instructions) Senior Management Analyst		Employer (See Instructions) SSA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Susan, Johnson	Amount of Contribution (\$)  \$2.09
Contributor address; City; State; Zip Code  Montclair, NJ 07043		
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#: _____ ) Suzanna, Brown	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Suzanna, Brown	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 48/53 Rpt: 51/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Suzanne, Sheppe <hr/> <b>6</b> Contributor address; City; State; Zip Code  Charlottesville, VA 22901	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) RN		<b>9</b> Employer (See Instructions) UVA Hospital
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Suzanne, Whatley <hr/> Contributor address; City; State; Zip Code  AUSTIN, TX 78735	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#: _____ ) Suzanne, Whatley <hr/> Contributor address; City; State; Zip Code  AUSTIN, TX 78735	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#: _____ ) Suzanne, Whatley <hr/> Contributor address; City; State; Zip Code  AUSTIN, TX 78735	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#: _____ ) Theodore, Chase Jr <hr/> Contributor address; City; State; Zip Code  Princeton, NJ 08540	Amount of Contribution (\$)  \$31.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 49/53 Rpt: 52/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Theresa, Garton	<b>7</b> Amount of Contribution (\$)  \$14.29
<b>6</b> Contributor address; City; State; Zip Code  Oklahoma City, OK 73131		
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Integrus Medical Group
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Theresa, Garton	Amount of Contribution (\$)  \$14.29
Contributor address; City; State; Zip Code  Oklahoma City, OK 73131		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Integrus Medical Group
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy, Dufour	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  Billerica, MA 01821		
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Genuine Interactive
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy, Dufour	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  Billerica, MA 01821		
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Genuine Interactive
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy, Norsworthy	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Millburn, NJ 07041		
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Bristol Myers Squibb

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 50/53 Rpt: 53/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Timothy, Norsworthy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Millburn, NJ 07041	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Marketing		<b>9</b> Employer (See Instructions) Bristol Myers Squibb
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Timothy, Norsworthy <hr/> Contributor address; City; State; Zip Code  Millburn, NJ 07041	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Bristol Myers Squibb
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Timothy, Ryan <hr/> Contributor address; City; State; Zip Code  Somerville, MA 02143	Amount of Contribution (\$)  \$3.75
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Facebook
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Timothy, Ryan <hr/> Contributor address; City; State; Zip Code  Somerville, MA 02143	Amount of Contribution (\$)  \$3.75
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Facebook
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tracey, Fisher <hr/> Contributor address; City; State; Zip Code  Los Gatos, CA 95032	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Varian Medical Systems

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 51/53 Rpt: 54/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tracey, Fisher	<b>7</b> Amount of Contribution (\$)  \$3.58
<b>6</b> Contributor address; City; State; Zip Code  Los Gatos, CA 95032		
<b>8</b> Principal occupation / Job title (See Instructions) Marketing		<b>9</b> Employer (See Instructions) Varian Medical Systems
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Travis, Faust	Amount of Contribution (\$)  \$1.88
Contributor address; City; State; Zip Code  Wellesley, MA 02481		
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) UMass Chan Medical School
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Travis, Faust	Amount of Contribution (\$)  \$1.88
Contributor address; City; State; Zip Code  Wellesley, MA 02481		
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) UMass Chan Medical School
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tyler, Compton	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Oakland, CA 94618		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Urban Machine
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tyler, Compton	Amount of Contribution (\$)  \$3.12
Contributor address; City; State; Zip Code  Oakland, CA 94618		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Urban Machine

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 52/53 Rpt: 55/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tyler, Compton <hr/> <b>6</b> Contributor address; City; State; Zip Code  Oakland, CA 94618	<b>7</b> Amount of Contribution (\$)  \$3.12
<b>8</b> Principal occupation / Job title (See Instructions) Software Engineer		<b>9</b> Employer (See Instructions) Urban Machine
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) W. Lee, Pittman <hr/> Contributor address; City; State; Zip Code  Birmingham, AL 35203	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Pittman Dutton & Hellums P.C.
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) William, Hwang <hr/> Contributor address; City; State; Zip Code  Brookline, MA 02446	Amount of Contribution (\$)  \$3.57
Principal occupation / Job title (See Instructions) Assistant Editor		Employer (See Instructions) Bedford/St. Martin's
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zachary, Duffy <hr/> Contributor address; City; State; Zip Code  San Jose, CA 95129	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Community Worker		Employer (See Instructions) Santa Clara County
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zachary, Duffy <hr/> Contributor address; City; State; Zip Code  San Jose, CA 95129	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Community Worker		Employer (See Instructions) Santa Clara County

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 53/53 Rpt: 56/82
<b>2</b> FILER NAME Cambio Texas PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) guadalupe, sosa <hr/> <b>6</b> Contributor address; City; State; Zip Code  AUSTIN, TX 78704	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) guadalupe, sosa <hr/> Contributor address; City; State; Zip Code  AUSTIN, TX 78704	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) miriam, wachs <hr/> Contributor address; City; State; Zip Code  New Jersey, NJ 07302	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Deloitte
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) miriam, wachs <hr/> Contributor address; City; State; Zip Code  New Jersey, NJ 07302	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Deloitte



# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/26 Rpt: 57/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/11/2024	<b>5</b> Payee name Adobe	
<b>6</b> Amount (\$) \$21.64  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 11501 Domain Drive, Suite 110  Austin, TX 78758	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/12/2024	Payee name Adobe	
Amount (\$) \$21.64  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11501 Domain Drive, Suite 110  Austin, TX 78758	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Software Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2024	Payee name Amazon	
Amount (\$) \$117.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109-5210	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies
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.

<b>1</b> Total pages Schedule F1: Sch: 2/26 Rpt: 58/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/22/2024	<b>5</b> Payee name Amazon	
<b>6</b> Amount (\$) \$151.54  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109-5210	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/25/2024	Payee name Amazon	
Amount (\$) \$32.10  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109-5210	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2024	Payee name Amazon	
Amount (\$) \$143.81  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109-5210	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies
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.

<b>1</b> Total pages Schedule F1: Sch: 3/26 Rpt: 59/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/15/2024	<b>5</b> Payee name American Airlines	
<b>6</b> Amount (\$) \$79.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code  TX	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Costs
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/18/2024	Payee name American Airlines	
Amount (\$) \$79.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code  TX	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 10/28/2024	Payee name Brandboosters	
Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 301 N McColl Rd Suite G  McAllen, TX 78501	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print Cost
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/26 Rpt: 60/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
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<b>4</b> Date 11/01/2024	<b>5</b> Payee name Brandboosters
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<b>6</b> Amount (\$) \$620.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 301 N McColl Rd Suite G  McAllen, TX 78501
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print Cost
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/04/2024	Payee name Brandboosters
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Amount (\$) \$300.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 301 N McColl Rd Suite G  McAllen, TX 78501
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Print Cost
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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 12/03/2024	Payee name Brandboosters
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Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 301 N McColl Rd Suite G  McAllen, TX 78501
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Print Cost
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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.

<b>1</b> Total pages Schedule F1: Sch: 5/26 Rpt: 61/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
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<b>4</b> Date 10/28/2024	<b>5</b> Payee name Call Hub
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<b>6</b> Amount (\$) \$250.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1250 I St NW #330  Washington, DC 20005
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertise Expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/01/2024	Payee name Call Hub
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Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1250 I St NW #330  Washington, DC 20005
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertise Expense
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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 11/04/2024	Payee name Call Hub
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Amount (\$) \$450.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1250 I St NW #330  Washington, DC 20005
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Polling Expense
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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.

<b>1</b> Total pages Schedule F1: Sch: 6/26 Rpt: 62/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/05/2024	<b>5</b> Payee name Call Hub	
<b>6</b> Amount (\$) \$650.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1250 I St NW #330  Washington, DC 20005	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Polling Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/06/2024	Payee name Call Hub	
Amount (\$) \$1,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1250 I St NW #330  Washington, DC 20005	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertise Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/18/2024	Payee name Call Hub	
Amount (\$) \$119.02  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1250 I St NW #330  Washington, DC 20005	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Polling Expense
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.

<b>1</b> Total pages Schedule F1: Sch: 7/26 Rpt: 63/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/19/2024	<b>5</b> Payee name Call Hub	
<b>6</b> Amount (\$) \$4,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1250 I St NW #330  Washington, DC 20005	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Polling Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/19/2024	Payee name Castlehill Bistro	
Amount (\$) \$148.83  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2113 W Trenton Rd  Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/22/2024	Payee name Civitech	
Amount (\$) \$10.83  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1023 Springdale  Austin, TX 78721	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertise Expense
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.

<b>1</b>	Total pages Schedule F1: Sch: 8/26 Rpt: 64/82	<b>2</b>	FILER NAME Cambio Texas PAC	<b>3</b>	Filer ID (Ethics Commission Filers) 00082985
<b>4</b>	Date 10/28/2024	<b>5</b>	Payee name Costco		
<b>6</b>	Amount (\$) \$27.20  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b>	Payee address; City; State; Zip Code 1501 W. Kelly  Pharr, TX 78577		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 11/08/2024		Payee name Costco		
	Amount (\$) \$148.89  <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 1501 W. Kelly  Pharr, TX 78577		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 11/25/2024		Payee name Costco		
	Amount (\$) \$221.26  <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 1501 W. Kelly  Pharr, TX 78577		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/26 Rpt: 65/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/30/2024	<b>5</b> Payee name Cricket	
<b>6</b> Amount (\$) \$130.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4017 S. McColl  Edinburg, TX 78539	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/18/2024	Payee name Cricket	
Amount (\$) \$46.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4017 S. McColl  Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Utility Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2024	Payee name Cricket	
Amount (\$) \$130.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4017 S. McColl  Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Utility Expense
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.

<b>1</b> Total pages Schedule F1: Sch: 10/26 Rpt: 66/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/18/2024	<b>5</b> Payee name Cricket	
<b>6</b> Amount (\$) \$46.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4017 S. McColl  Edinburg, TX 78539	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/30/2024	Payee name Cricket	
Amount (\$) \$130.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4017 S. McColl  Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Utility Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2024	Payee name DEBC	
Amount (\$) \$925.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 Paseo Del Prado  Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Utility Expense
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.

<b>1</b> Total pages Schedule F1: Sch: 11/26 Rpt: 67/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
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<b>4</b> Date 12/06/2024	<b>5</b> Payee name DEBC
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<b>6</b> Amount (\$) \$925.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 135 Paseo Del Prado  Edinburg, TX 78539
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/24/2024	Payee name DEBC
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Amount (\$) \$925.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 Paseo Del Prado  Edinburg, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Utility Expense
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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 11/21/2024	Payee name DeleteMe
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Amount (\$) \$103.20  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1 Marina Park Dr. Suite 1410  Boston, MA
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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 Consulting
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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.

<b>1</b> Total pages Schedule F1: Sch: 12/26 Rpt: 68/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/04/2024	<b>5</b> Payee name Facebook	
<b>6</b> Amount (\$) \$317.52  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1 Hacker Way  Menlo Park, CA 94025	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertise Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2024	Payee name Gsuite	
Amount (\$) \$30.70  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway  Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Gsuite	
Amount (\$) \$30.70  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway  Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Expense
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.

<b>1</b> Total pages Schedule F1: Sch: 13/26 Rpt: 69/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
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<b>4</b> Date 11/12/2024	<b>5</b> Payee name Home Depot
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<b>6</b> Amount (\$) \$51.69  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 801 Trenton Rd  McAllen, TX 78504
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/22/2024	Payee name Home Depot
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Amount (\$) \$278.21  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 801 Trenton Rd  McAllen, TX 78504
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
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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 10/30/2024	Payee name Hustle
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Amount (\$) \$3,085.62  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 548 Market St  San Francisco, CA 94104
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertise Expense
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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.

<b>1</b> Total pages Schedule F1: Sch: 14/26 Rpt: 70/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/05/2024	<b>5</b> Payee name Hustle	
<b>6</b> Amount (\$) \$3,916.20  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 548 Market St  San Francisco, CA 94104	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertise Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2024	Payee name Hustle	
Amount (\$) \$606.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 548 Market St  San Francisco, CA 94104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertise Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/12/2024	Payee name Juice Us	
Amount (\$) \$23.65  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1703 W Trenton Rd  Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meal Expense
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.

<b>1</b> Total pages Schedule F1: Sch: 15/26 Rpt: 71/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/12/2024	<b>5</b> Payee name Juice Us	
<b>6</b> Amount (\$) \$22.55  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1703 W Trenton Rd  Edinburg, TX 78539	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/27/2024	Payee name Juice Us	
Amount (\$) \$21.22  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1703 W Trenton Rd  Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meal Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/23/2024	Payee name Logan's Roadhouse	
Amount (\$) \$90.64  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7612 N 10th St N  McAllen, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meal Expense
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.

<b>1</b> Total pages Schedule F1: Sch: 16/26 Rpt: 72/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/21/2024	<b>5</b> Payee name Microsoft	
<b>6</b> Amount (\$) \$21.64  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1 Microsoft Way  Redmond, WA 98052	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/25/2024	Payee name Microsoft	
Amount (\$) \$10.81  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1 Microsoft Way  Redmond, WA 98052	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Software Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/20/2024	Payee name Microsoft	
Amount (\$) \$21.64  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1 Microsoft Way  Redmond, WA 98052	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Software Expense
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.

<b>1</b> Total pages Schedule F1: Sch: 17/26 Rpt: 73/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/23/2024	<b>5</b> Payee name Microsoft	
<b>6</b> Amount (\$) \$10.81  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1 Microsoft Way  Redmond, WA 98052	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/06/2024	Payee name Murphy USA	
Amount (\$) \$127.41  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 215 E Expressway 83  Weslaco, TX 78596	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name New Egg	
Amount (\$) \$713.34  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 17560 Rowland Street  City of Industry, CA 91748	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
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.

<b>1</b> Total pages Schedule F1: Sch: 18/26 Rpt: 74/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
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<b>4</b> Date 11/06/2024	<b>5</b> Payee name New Egg
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<b>6</b> Amount (\$) \$70.90  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 17560 Rowland Street  City of Industry, CA 91748
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/18/2024	Payee name New Egg
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Amount (\$) \$154.77  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 17560 Rowland Street  City of Industry, CA 91748
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Office Supplies
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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 11/13/2024	Payee name Oakwells
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Amount (\$) \$64.59  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2500 S Bicentennial Blvd  McAllen, TX 78503
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meal Expense
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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.

<b>1</b> Total pages Schedule F1: Sch: 19/26 Rpt: 75/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/14/2024	<b>5</b> Payee name Oakwells	
<b>6</b> Amount (\$) \$24.12  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2500 S Bicentennial Blvd  McAllen, TX 78503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/13/2024	Candidate/Officeholder name Panera Bread	
Amount (\$) \$40.20  <input type="checkbox"/> Expenditure from corporate funds	Office sought 201 E Trenton  Edinburg, TX 78539	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Expense
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/08/2024	Candidate/Officeholder name Pho Houston	
Amount (\$) \$32.43  <input type="checkbox"/> Expenditure from corporate funds	Office sought 139 W Nolana Ave  McAllen, TX 78504	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Expense
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/26 Rpt: 76/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 10/28/2024	<b>5</b> Payee name Public Research Group	
<b>6</b> Amount (\$) \$2,874.31  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code  TX	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cavass Labor
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Gracia, Jonathan	Office sought State Representative District 37  Office held
Date 10/30/2024	Payee name Public Research Group	
Amount (\$) \$1,275.03  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code  TX	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Polling Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought  Office held
Date 11/12/2024	Payee name Rolling Stone	
Amount (\$) \$7.99  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 5th Avenue  New York, NY 10017	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription Expense
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.

<b>1</b> Total pages Schedule F1: Sch: 21/26 Rpt: 77/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/09/2024	<b>5</b> Payee name Rolling Stone	
<b>6</b> Amount (\$) \$7.99  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 475 5th Avenue  New York, NY 10017	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/18/2024	Payee name Small PDF	
Amount (\$) \$12.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 101 West Renner Road  Richardson, TX 75082	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2024	Payee name Small PDF	
Amount (\$) \$12.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 101 West Renner Road  Richardson, TX 75082	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Expense
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.

<b>1</b> Total pages Schedule F1: Sch: 22/26 Rpt: 78/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/25/2024	<b>5</b> Payee name Spectrum	
<b>6</b> Amount (\$) \$120.62  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 400 Washington Blvd  Stamford, CT 06802	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/26/2024	Candidate/Officeholder name Spectrum	
Amount (\$) \$120.62  <input type="checkbox"/> Expenditure from corporate funds	Office sought 400 Washington Blvd  Stamford, CT 06802	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/30/2024	Candidate/Officeholder name Spirit Halloween	
Amount (\$) \$116.83  <input type="checkbox"/> Expenditure from corporate funds	Office sought TX	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 23/26 Rpt: 79/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/19/2024	<b>5</b> Payee name Stripes	
<b>6</b> Amount (\$) \$43.76  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3703 S Closner Blvd  Edinburg, TX 78539	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Sunoco	
Amount (\$) \$50.10  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2100 W Trenton Rd  Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2024	Payee name Sunoco	
Amount (\$) \$42.79  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2100 W Trenton Rd  Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel Expense
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.

<b>1</b> Total pages Schedule F1: Sch: 24/26 Rpt: 80/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/06/2024	<b>5</b> Payee name Texas Democratic Party	
<b>6</b> Amount (\$) \$335.79  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code P.O. Box 15707  Austin, TX 78761	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/12/2024	Payee name Umiya	
Amount (\$) \$17.62  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4400 N 10th St  McAllen, TX 78504	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/28/2024	Payee name Walmart	
Amount (\$) \$69.92  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1421 E Frontage Rd  Alamo, TX 78516	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
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.

<b>1</b> Total pages Schedule F1: Sch: 25/26 Rpt: 81/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 11/13/2024	<b>5</b> Payee name Walmart	
<b>6</b> Amount (\$) \$89.23  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1421 E Frontage Rd  Alamo, TX 78516	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2024	Payee name Walmart	
Amount (\$) \$21.17  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1421 E Frontage Rd  Alamo, TX 78516	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/12/2024	Payee name Walmart	
Amount (\$) \$62.34  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1421 E Frontage Rd  Alamo, TX 78516	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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.

<b>1</b> Total pages Schedule F1: Sch: 26/26 Rpt: 82/82	<b>2</b> FILER NAME Cambio Texas PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00082985
<b>4</b> Date 12/16/2024	<b>5</b> Payee name Walmart	
<b>6</b> Amount (\$) \$18.27  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1421 E Frontage Rd  Alamo, TX 78516	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2024	Payee name Wix.com	
Amount (\$) \$38.97  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 100 Gansevoort St  New York, NY 10014	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Software Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/06/2024	Payee name Wix.com	
Amount (\$) \$38.97  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 100 Gansevoort St  New York, NY 10014	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Software Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held