### COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

# FORM CEC COVER SHEET PG 1

Th	e CEC Instruction G	uide explains how to complete this form.		1 Filer ID <sup>(E</sup> 00016343	Ethics Commission F	Filers)	<ol> <li>Total pag</li> <li>42</li> </ol>	es filed:	
3	COMMITTEE NAME						OFFIC	CE USF	ONLY
	Hays County Demo	ocratic Party					Date Received		
							ELECTRO		( FILED
							01/15/2025		
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY	/; STAT		CODE			
ľ	ADDRESS	P.O. Box 204	011	i, JIAI	∟, ∠IF	CODL			
	—						Date Hand-delive	ered or Date	Postmarked
	Change of Address	San Marcos, TX 78667					Receipt #	Δm	nount
							Date Processed	<u> </u>	
							Date Imaged		
5	CAMPAIGN TREASURER	MS/MRS/MR FIRST					MI		
	NAME	Jeffry							
		NICKNAME LAST					SUFFIX		
		Weems							
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE	=).	. م ۷	T / SUITE #;	CITY;		STATE;	ZIP CODE
ľ	TREASURER	514 Cypress Creek Lane	_),	AP	, , JOHE #,	CITT,		JIAIE,	
	STREET ADDRESS								
	(Residence or Business)	Wimberley, TX 78676							
<u> </u> -	CAMPAIGN	STREET OR PO BOX;			PT / SUITE #;	CITY;		STATE	ZIP CODE
Ľ	TREASURER	PO Box 739		AI	- 1 / SUITE #;	CHY;		STATE	
	MAILING ADDRESS								
		Wimborlow TV 70070							
	Change of Address	Wimberley, TX 78676							
8		AREA CODE PHONE NUMBER	E	XTENSION					
	TREASURER PHONE	(281) 220-9355							
L		L							
9	REPORT TYPE	X January 15	30t	h day before elec	ction		Final Report	İ	
			8th	day before elect	ion		10th day aft	er campaig	n treasurer
		July 15	Ru	noff		L	termination		
10	PERIOD COVERED	Month Day Year	<b></b>		Month	Day	Year		
	SOVENED	10/27/2024	ΙH	ROUGH	12	2/31/2024	Ļ		
11	ELECTION	ELECTION DATE			ELECTION				
		Month Day Year	Pr	imary	Runoff	1166	Other		
				-					
			Ge	eneral	Special				
$\vdash$									
		G	от	O PAGE 2					
Fo	rms provided by Tex	xas Ethics Commission www	v.eth	nics.state.tx.u	S		V	ersion V	4.1.0.5dd2ace2

## COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME				<b>13</b> Fi	ler ID	(Ethics Commission Filers)
Hays County Democrat	ic Party			00	016343	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Democrat			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOAN	S, OR GUARAN MADE ELECT	. CONTRIBUTIONS (OTHE NTEES OF LOANS, OR RONICALLY) e higher itemization threshold	ER THAN	\$	315.00
	2. TOTAL POLITIC (OTHER THAN P		<b>BUTIONS</b> NS, OR GUARANTEES OF	LOANS)	\$	12,563.97
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICAL	. EXPENDITURES		\$	0.00
	4. TOTAL POLITIC	CAL EXPEND	ITURES		\$	29,889.13
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT		IONS MAINTAINED AS OF	THE LAST DAY	\$	40,635.09
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPA LAST DAY OF TH		ALL OUTSTANDING LOA PERIOD	ANS AS OF THE	\$	0.00
16 AFFIDAVIT	•				•	
			I swear, or affirm, under p true and correct and inclu under Title 15, Election C	ides all information		
				Jeffry Weer		or
			Sigi	nature of Campaig	n neasur	
AFFIX NOTARY	STAMP / SEAL ABOV	E				
					e	day
of	_, 20, to certi	y which, witnes	s my hand and seal of offic	æ.		
Signature of officer ad	ministering oath	Printed name	e of officer administering oa	ath Ti	tle of office	er administering oath
Forms provided by Texas E	thics Commission	www	v.ethics.state.tx.us			Version V4.1.0.5dd2ace2

SUBTOTALS - CEC	C	FORM OVER SHEE	A CEC T PG 3 3 of 42
17 COMMITTEE NAME Hays County Democratic Party	18 Filer ID 00016343	(Ethics Commiss	ion Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL	. AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	7,563.97
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	5,000.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4. SCHEDULE E: LOANS		\$	
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	29,889.13
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
10. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 1/21 Rpt: 4/42
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Hays County	y Democratic Party		00016343
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
11/24/2024	Adams, John		\$10.00
	6 Contributor address; City; State; Zip Code		
	Dripping Springs, TX 78620		
	upation / Job title (See Instructions)	9 Employer (See Instructions)	3)
Manager		ACS Inc	
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
12/24/2024			\$10.00
	Contributor address; City; State; Zip Code		
	Dripping Springs, TX 78620		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u></u>
Manager		ACS Inc	<i>יי</i>
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
11/26/2024	Full name of contributor out-of-state PAC (ID#: Balcombe, April	·/	\$10.00
11/20/202.	Contributor address; City; State; Zip Code		· · · · · · · · · · · · · · · · · · ·
	Austin , TX 78737		
	upation / Job title (See Instructions)	Employer (See Instructions)	;) ;)
Court Repor	ter	Echo Connection	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
12/26/2024	Balcombe, April		\$10.00
	Contributor address; City; State; Zip Code		
Drippingl oppu	Austin , TX 78737		
Court Repor	upation / Job title (See Instructions)	Employer (See Instructions) Echo Connection	;)
Date 11/09/2024	Full name of contributor out-of-state PAC (ID#: Barker, Shelley	)	Amount of Contribution (\$) \$10.00
11/03/2024	-		φ±0.00
	Contributor address; City; State; Zip Code		
	Odessa, TX 79761		
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions)	<u>ا</u> ۵)
Teacher		Ector ISD	
		<u> </u>	

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 2/21 Rpt: 5/42
2	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
		y Democratic Party		00016343
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
	12/09/2024	Barker, Shelley		\$10.00
		6 Contributor address; City; State; Zip Code		
Ļ	Dringing oppu	Odessa, TX 79761		
8	Principal occu Teacher	ipation / Job title (See Instructions)	9 Employer (See Instructions Ector ISD	6)
				1
	Date		)	Amount of Contribution (\$)
	11/10/2024			\$20.00
		Contributor address; City; State; Zip Code		
		Kyle, TX 78610		
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	Financial Ad		Self	<i>י</i> י
	Date		)	Amount of Contribution (\$)
	12/10/2024	Barton, Zachary	/	\$20.00
	12,10,202.	Contributor address; City; State; Zip Code		+=
		Kyle, TX 78610		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Financial Ad	visor	Self	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	11/12/2024	Blackburn, Robin		\$10.00
		Contributor address; City; State; Zip Code		
	<u> </u>	San Marcos, TX 78666	<u> </u>	-
		<pre>ipation / Job title (See Instructions)</pre>	Employer (See Instructions	S)
	Editor		Stratfor	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	12/12/2024	Blackburn, Robin		\$10.00
		Contributor address; City; State; Zip Code		
		San Marcos, TX 78666		
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
	Editor		Stratfor	>)
⊢				

	The Instru	ction Guide explains how to co	omplete this for	rm.	1	Total pages Schedule A1: Sch: 3/21 Rpt: 6/42	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Hays County	/ Democratic Party				00016343	
	Date		-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	11/08/2024	Calvert, Amanda					\$10.00
		6 Contributor address; City; State; Zip					
		San Marcos , TX 78666					
		pation / Job title (See Instructions)	9	Employer (See Instructions)	)		
	Lead Superv			Hays County DA Office			
	Date		-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	12/08/2024	Calvert, Amanda Contributor address; City; State; Zip					\$10.00
		San Marcos , TX 78666					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	;)		
	Lead Superv			Hays County DA Office			
	Date	Full name of contributor	-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	11/08/2024	Carriker, Kathy					\$10.00
		Contributor address; City; State; Zip Code					
		Contributor address; City; State; Zip					
		Dripping Springs, TX 78620					
	-	Dripping Springs, TX 78620 pation / Job title (See Instructions)		Employer (See Instructions)	;)		
	Not Employe	Dripping Springs, TX 78620 pation / Job title (See Instructions) ed	o Code	Employer (See Instructions) Not Employed		Amount of Contribution (#)	
	Not Employe	Dripping Springs, TX 78620 pation / Job title (See Instructions) ed Full name of contributor out-		Employer (See Instructions) Not Employed	;) 	Amount of Contribution (\$)	\$10.00
	Not Employe	Dripping Springs, TX 78620 pation / Job title (See Instructions) ed Full name of contributor out- Carriker, Kathy	o Code	Employer (See Instructions) Not Employed	)	Amount of Contribution (\$)	\$10.00
	Not Employe	Dripping Springs, TX 78620 pation / Job title (See Instructions) ed Full name of contributor out- Carriker, Kathy	o Code	Employer (See Instructions) Not Employed	)	Amount of Contribution (\$)	\$10.00
	Not Employe Date 12/08/2024	Dripping Springs, TX 78620 pation / Job title (See Instructions) ed Full name of contributor out- Carriker, Kathy Contributor address; City; State; Zip Dripping Springs, TX 78620	o Code	Employer (See Instructions) Not Employed		Amount of Contribution (\$)	\$10.00
	Not Employe Date 12/08/2024	Dripping Springs, TX 78620 pation / Job title (See Instructions) ed Full name of contributor out- Carriker, Kathy Contributor address; City; State; Zip Dripping Springs, TX 78620 pation / Job title (See Instructions)	o Code	Employer (See Instructions) Not Employed		Amount of Contribution (\$)	\$10.00
	Not Employe Date 12/08/2024 Principal occu	Dripping Springs, TX 78620 pation / Job title (See Instructions) ed Full name of contributor out- Carriker, Kathy Contributor address; City; State; Zip Dripping Springs, TX 78620 pation / Job title (See Instructions) ed	o Code	Employer (See Instructions) Not Employed		Amount of Contribution (\$)	\$10.00
	Not Employe Date 12/08/2024 Principal occu Not Employe	Dripping Springs, TX 78620 pation / Job title (See Instructions) ed Full name of contributor out- Carriker, Kathy Contributor address; City; State; Zip Dripping Springs, TX 78620 pation / Job title (See Instructions) ed	o Code	Employer (See Instructions) Not Employed			\$10.00
	Not Employe Date 12/08/2024 Principal occu Not Employe Date	Dripping Springs, TX 78620 pation / Job title (See Instructions) ed Full name of contributor out- Carriker, Kathy Contributor address; City; State; Zip Dripping Springs, TX 78620 pation / Job title (See Instructions) ed Full name of contributor out-	• Code •of-state PAC (ID#:	Employer (See Instructions) Not Employed			
	Not Employe Date 12/08/2024 Principal occu Not Employe Date	Dripping Springs, TX 78620 pation / Job title (See Instructions) ed Full name of contributor out- Carriker, Kathy Contributor address; City; State; Zip Dripping Springs, TX 78620 pation / Job title (See Instructions) ed Full name of contributor out- Cetina, Charles	• Code •of-state PAC (ID#:	Employer (See Instructions) Not Employed			
	Not Employe Date 12/08/2024 Principal occu Not Employe Date 12/20/2024	Dripping Springs, TX 78620 pation / Job title (See Instructions) ed Full name of contributor	• Code •of-state PAC (ID#:	Employer (See Instructions) Not Employed	)		

	The Instru	ction Guide explains how to complete this f	orm.		Total pages Schedule A1: Sch: 4/21 Rpt: 7/42	
2	FILER NAME			3	Filer ID (Ethics Commission	i Filers)
		y Democratic Party			00016343	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	10/29/2024	Chavez, Deborah				\$25.00
		6 Contributor address; City; State; Zip Code		1		
Ļ		Buda, TX 78620	1			
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Not Employe	2d	Not Employed			
	Date		)	Ţ	Amount of Contribution (\$)	
	11/29/2024	Chavez, Deborah				\$25.00
		Contributor address; City; State; Zip Code		1		
	<u></u>	Buda, TX 78620	1 <u> </u>	Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	1	Not Employed			
	Date		)		Amount of Contribution (\$)	
	12/29/2024	Chavez, Deborah				\$25.00
		Contributor address; City; State; Zip Code				
		Duda TV 70600				
$\vdash$	Dringing occu	Buda, TX 78620	Employer (See Instructions	<u> </u>		
	Not Employe	Ipation / Job title (See Instructions)	Employer (See Instructions Not Employed	S)		
╞				<u> </u>		
	Date		)	·	Amount of Contribution (\$)	¢10.00
	11/12/2024	Cummings, Terry				\$10.00
		Contributor address; City; State; Zip Code				
		Buda, TX 78610				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	.,		
╞	Date	Full name of contributor out-of-state PAC (ID#:		T	Amount of Contribution (\$)	
	12/12/2024	Cummings, Terry	/			\$10.00
		Contributor address; City; State; Zip Code				Ψ±0.00
		Continuation address, City, State, Zip Code				
		Buda, TX 78610				
⊢	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed			
⊢	-		· -			

	The Instru	ction Guide explains how to comp	lete this fo	orm.	1	Total pages Schedule A1: Sch: 5/21 Rpt: 8/42	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Hays County	y Democratic Party				00016343	-
4	Date	te <b>5</b> Full name of contributor out-of-state PAC (ID#:)			7	Amount of Contribution (\$)	
	11/15/2024	Friedman, Ivan					\$10.00
		6 Contributor address; City; State; Zip Cod					
L		San Marcos, TX 78666					
8		pation / Job title (See Instructions)		9 Employer (See Instructions)	)		
	Attorney			Self			
	Date		ate PAC (ID#:_	)		Amount of Contribution (\$)	
	12/15/2024	Friedman, Ivan					\$10.00
		Contributor address; City; State; Zip Cod					
		San Marcos, TX 78666					
┝	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	<u> </u>		
	Attorney			Self	)		
╞	Date	Full name of contributor Out-of-sta				Amount of Contribution (\$)	
	10/29/2024	Gardner, Mark	ate PAC (ID#:	)			\$20.00
	10/20/202 .						Ψ20.00
		Kyle, TX 78640					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	)		
	Not Employe	3d		Not Employed			
F	Date	Full name of contributor	ate PAC (ID#:	)		Amount of Contribution (\$)	
	10/27/2024	Gill, Orion					\$25.00
		Contributor address; City; State; Zip Cod					
		T-00700 14/4 00/10					
$\vdash$	Dringing occ	Tacoma, WA 98418		Employer (See Instructions)	\		
	Not Employe	ipation / Job title (See Instructions)		Employer (See Instructions)	)		
L							
	Date		ate PAC (ID#:	)		Amount of Contribution (\$)	¢E 00
	11/12/2024	Gocha, Timothy					\$5.00
		Contributor address; City; State; Zip Cod	le				
		Columbus, OH 43205					
⊢	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions)	)		
		eaching Assistant		The Ohio State Universit			
$\vdash$			I		-		

	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 6/21 Rpt: 9/42	
2	FILER NAME			3	Filer ID (Ethics Commissio	n Filers)
		Democratic Party			00016343	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	12/12/2024	Gocha, Timothy				\$5.00
		6 Contributor address; City; State; Zip Code		1		
		Columbus, OH 43205	-			
8		pation / Job title (See Instructions)	9 Employer (See Instructions			
	Graduate Te	aching Assistant	The Ohio State Universi	ity		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	11/12/2024	Harding, Genest				\$15.00
		Contributor address; City; State; Zip Code		1		
		Kyle, TX 78640	1			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	:d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	11/12/2024	Haschke, Donna				\$10.00
		Contributor address; City; State; Zip Code		1		
		Buda, TX 78610	1			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	12/12/2024	Haschke, Donna				\$10.00
		Contributor address; City; State; Zip Code				
		P. 4- TV 70010				
┝	Dringing oppu	Buda, TX 78610	Employer (Cool potructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Reureu		Not Employed	-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	11/13/2024	Hatch, John				\$100.00
		Contributor address; City; State; Zip Code				
		Puda TV 70610				
L	Deinsinglasse	Buda, TX 78610				
	Consultant	pation / Job title (See Instructions)	Employer (See Instructions Texas Petition Strategie			
	Consultant			5		

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/21 Rpt: 10/42	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
-		y Democratic Party			00016343	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	12/13/2024	Hatch, John				\$100.00
		6 Contributor address; City; State; Zip Code		1		
		Buda, TX 78610				
8		pation / Job title (See Instructions)	9 Employer (See Instructions			
	Consultant		Texas Petition Strategie	es		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	11/09/2024	Herrick, Kathie				\$10.00
		Contributor address; City; State; Zip Code		1		
		Kyle, TX 78640	1			
	•	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not employe	:d				
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	12/09/2024	Herrick, Kathie				\$10.00
		Contributor address; City; State; Zip Code		]		
		16 to TV 706 40				
		Kyle, TX 78640		Ĺ		
	Principal occu Not employe	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
				-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/31/2024	Hilburn, Peggy				\$50.00
		Contributor address; City; State; Zip Code				
		San Marcos, TX 78666				
	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired		None	5)		
				T	Array of Contribution (f)	
	Date 11/30/2024	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$50.00
	11/30/2024	Hillburn, Peggy		•		Φ00.00
		Contributor address; City; State; Zip Code				
		San Marcos, TX 78666				
_	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ב)		
	Not Employe		Retired	5)		
<u> </u>			Retired			

	The Instru	ction Guide explains how to complete	this fo	orm.	1	Total pages Schedule A1: Sch: 8/21 Rpt: 11/42	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Hays County	y Democratic Party				00016343	-
4	Date	5 Full name of contributor out-of-state PAG	AC (ID#:_	)	7	Amount of Contribution (\$)	
	12/31/2024	Hillburn, Peggy					\$50.00
		6 Contributor address; City; State; Zip Code					
		0 N TV 70000					
Ļ	Dringing oog	San Marcos, TX 78666		Employer (Soo Instructions	<u> </u>		
ð	Not Employe	ipation / Job title (See Instructions) ed		9 Employer (See Instructions Retired	)		
╞			·				
	Date		4C (ID#:	)		Amount of Contribution (\$)	¢10.00
	11/13/2024						\$10.00
		Contributor address; City; State; Zip Code					
		Buda, TX 78610					
	Principal occu	I Ipation / Job title (See Instructions)		Employer (See Instructions	)		
	Not Employe						
╞	Date	Full name of contributor out-of-state PAG	AC (ID#:_	)		Amount of Contribution (\$)	
	12/13/2024	Hillman, Jason	·				\$10.00
		Contributor address; City; State; Zip Code					
		Buda, TX 78610					
		ipation / Job title (See Instructions)		Employer (See Instructions	)		
	Not Employe						
	Date		\C (ID#:_	)		Amount of Contribution (\$)	
	11/09/2024						\$10.00
		Contributor address; City; State; Zip Code					
		Austin, TX 78737					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Attorney			Smith & Vinson	,		
╞	Date	Full name of contributor Out-of-state PAG	AC (ID#:	)		Amount of Contribution (\$)	
	12/09/2024	Huynh, Jessica					\$10.00
		Austin, TX 78737					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	Attorney			Smith & Vinson			

The Instruc	ction Guide explains ho	w to complete this f	iorm.	1 Total pages Schedule A1: Sch: 9/21 Rpt: 12/42	
2 FILER NAME				<b>3</b> Filer ID (Ethics Commission Fi	ilers)
Hays County	y Democratic Party			00016343	
4 Date	Date 5 Full name of contributor out-of-state PAC (ID#:)			7 Amount of Contribution (\$)	
11/25/2024	Hyde, Bill				\$4.00
	6 Contributor address; City; S	State; Zip Code			
	Kyle, TX 78640				
	pation / Job title (See Instruction	IS)	9 Employer (See Instructions)	)	
Self-Employe	ed		Self		
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
12/25/2024	Hyde, Bill				\$4.00
	Contributor address; City; S				
	Kulo TV 79640				
Dringing occu	Kyle, TX 78640		Employer (See Instructions)	N	
Self-Employe		15)	Self	)	
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	<u> </u>
11/08/2024	Ishibashi, Susan			\$10.00	
	Contributor address; City; S	state; Zip Coue			
	Kyle, TX 78640				
Principal occu	pation / Job title (See Instruction	 IS)	Employer (See Instructions)	)	
Not Employe	ed .		Not Employed		
Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
12/08/2024	Ishibashi, Susan				\$10.00
	Contributor address; City; S	State; Zip Code			
	Kyle, TX 78640				
	pation / Job title (See Instruction	IS)	Employer (See Instructions)	)	
Not Employe	.d		Not Employed		
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
11/18/2024	Jensen, Ann				\$10.00
	Contributor address; City; S	State; Zip Code			
	San Marcos, TX 78666				
Dringing ogg	San Marcos, TX 78666	\		N	
Principal occu Instructional	pation / Job title (See Instruction	iS)	Employer (See Instructions) Texas State University	)	
	Designer		Texas State Oniversity		
			•		

The Instr	ruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 10/21 Rpt: 13/42	
2 FILER NAM			3 Filer ID (Ethics Commission F	ilers)
	nty Democratic Party		00016343	10.0)
4 Date 12/18/2024	<ul> <li>Full name of contributor out-of-state PAC (ID#:</li> <li>Jensen, Ann</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$)	\$10.00
	San Marcos, TX 78666			
-	cupation / Job title (See Instructions)	9 Employer (See Instructions)	)	
Instruction	al Designer	Texas State University		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
10/30/2024				\$25.00
	Contributor address; City; State; Zip Code			
	San Marcos, TX 78666			
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions)	)	
Real Estate	e Investor	Self		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
11/30/2024				\$25.00
	Contributor address; City; State; Zip Code			
	San Marcos, TX 78666			
	cupation / Job title (See Instructions)	Employer (See Instructions)	)	
Real Estate	e Investor	Self		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
12/30/2024	4 Johnson, Lucy			\$25.00
	Contributor address; City; State; Zip Code			
	San Marcos, TX 78666			
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions)	)	
Real Estate	e Investor	Self		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
11/17/2024				\$10.00
	Contributor address; City; State; Zip Code			
	San Marcos, TX 78666			
·	cupation / Job title (See Instructions)	Employer (See Instructions)	)	
Retired		Retired		

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	The Instruc	ction Guide explains how to complete this	form.		Total pages Schedule A1: Sch: 11/21 Rpt: 14/42	
2	FILER NAME			-	Filer ID (Ethics Commission	n Filers)
		/ Democratic Party		1	00016343	
4	Date	5 Full name of contributor out-of-state PAC (ID#	)	7	Amount of Contribution (\$)	
	12/17/2024	Juarez, Ana				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Or Margan TV 20006				
Ļ	Dringing occu	San Marcos, TX 78666	Compared (See Instructions	<u> </u>		
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions Retired	S)		
╘		· · · · · · · · · · · · · · · · · · ·		T		
	Date	Full name of contributor Out-of-state PAC (ID#	:)		Amount of Contribution (\$)	<b>*</b> 25 00
	11/15/2024					\$25.00
		Contributor address; City; State; Zip Code				
		Wimberley, TX 78676				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	-,		
╞	Date	Full name of contributor out-of-state PAC (ID#		Τ	Amount of Contribution (\$)	
	12/15/2024	Kenney, Gregory	·/		Allount of Contribution (4)	\$25.00
				·		*=0
		Wimberley, TX 78676				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	:d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#	·)		Amount of Contribution (\$)	
	11/12/2024	Kleinpeter, Amy				\$10.00
		Contributor address; City; State; Zip Code		"		
		Manor, TX 78653				
	•	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney		Ciment Law Firm	-		
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	12/12/2024	Kleinpeter, Amy				\$10.00
		Contributor address; City; State; Zip Code				
		Manor, TX 78653				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Attorney		Ciment Law Firm	5)		
$\vdash$	7.00110,					

	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/21 Rpt: 15/42	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		y Democratic Party				00016343	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	10/28/2024	Kyle Buda Area Democrat					\$1,200.00
	I	6 Contributor address; City; Sta	ate; Zip Code				
		Buda, TX 78610					
8	Principal occu	pation / Job title (See Instructions)	1	9 Employer (See Instructions	5)		
╞━	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/29/2024	Landaker, Betsy				,	\$20.00
		Contributor address; City; Sta					
			(10, <u>L.p</u> 0000				
		Wimberley, TX 78676					
		pation / Job title (See Instructions)	)	Employer (See Instructions	5)		
	Consultant			Self Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	10/27/2024	Linebarger, Dale					\$2,500.00
	l	Contributor address; City; Sta	ate; Zip Code		1		
		Austin, TX 78703					
	Principal occu	Ipation / Job title (See Instructions)	<u></u>	Employer (See Instructions	<u> </u> :)		
	None			None	"		
	Date	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	
	11/22/2024	Love, Gordy	טעויטויסומני אל נושיי	/		Allount of Contribution (*)	\$10.00
	<b>**</b> , <b>==</b> , =	Contributor address; City; Sta	ate: Zin Code				<b>*</b>
		San Marcos, TX 78666					
	•	pation / Job title (See Instructions)	)	Employer (See Instructions	5)		
	Not Employe	ed		Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	12/22/2024	Love, Gordy					\$10.00
	I	Contributor address; City; Sta	ate; Zip Code				
		San Marcos, TX 78666					
	Dringing occu	San Marcos, TX 78666		Employer (See Instructions	<u> </u>		
	Not Employe	ipation / Job title (See Instructions) ed	1	Employer (See Instructions Not Employed	5)		
		:u		Νοι Επρισγού			

The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A1:
	-		Sch: 13/21 Rpt: 16/42
2 FILER NAME Havs Count	- y Democratic Party		<b>3</b> Filer ID (Ethics Commission Filers) 00016343
4 Date	5 Full name of contributor Out-of-state PAC (ID#:		7 Amount of Contribution (\$)
4 Date 11/14/2024		/	\$10.00
11/17/2VC .	6 Contributor address; City; State; Zip Code		
	Continuutor address, City, State, Zip Code		
	San Marcos, TX 78666		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
Caregiver		Madeline Busch	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
12/14/2024	McIntyre, Pam		\$10.00
	Contributor address; City; State; Zip Code		
	San Marcos, TX 78666		
	upation / Job title (See Instructions)	Employer (See Instructions	3)
Caregiver		Madeline Busch	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
11/13/2024	Moya, Lori		\$15.00
	Contributor address; City; State; Zip Code		
	Buda, TX 78610		Į
-	upation / Job title (See Instructions)	Employer (See Instructions	;)
Not Employe		Not Employed	T
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
11/12/2024	Murphy, Mark		\$10.00
	Contributor address; City; State; Zip Code		
	San Marcos, TX 78666		
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Not employe			<i>,</i>
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
12/12/2024			\$10.00
	Contributor address; City; State; Zip Code		
	San Marcos, TX 78666		
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	s)
Not employe	ed		

					_		
	The Instru	ction Guide explains how to comple	ete this fo	orm.	1	Total pages Schedule A1: Sch: 14/21 Rpt: 17/42	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Hays County	/ Democratic Party				00016343	-
4	Date	5 Full name of contributor out-of-state	e PAC (ID#:_	)	7	Amount of Contribution (\$)	
	11/12/2024	Musgrove, Mahlin					\$10.00
		6 Contributor address; City; State; Zip Code					
Ļ	<u> </u>	Buda, TX 78610			Ļ		
8		pation / Job title (See Instructions)		9 Employer (See Instructions	)		
	Supply Chai			NXP Semiconductors	—		
	Date		e PAC (ID#:	)		Amount of Contribution (\$)	
	12/12/2024						\$10.00
		Contributor address; City; State; Zip Code					
		Buda, TX 78610					
	Princinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>ו</u>		
	Supply Chair			NXP Semiconductors	,		
-	Date	Full name of contributor out-of-state				Amount of Contribution (\$)	
	10/28/2024	Neumann, Kenneth	3 PAC (ID#				\$25.00
	10,20,202	Contributor address; City; State; Zip Code					¥20.00
		San Marcos, TX 78666					
		pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Not Employe	ed		None			
	Date	Full name of contributor out-of-state	e PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	11/02/2024	Newlan, Nichole					\$10.00
		Contributor address; City; State; Zip Code					
	Dringing ago	Austin, TX 78737		Employer (Coo Instructions	Ĺ		
	Accounting N	pation / Job title (See Instructions)		Employer (See Instructions Whole Foods Market	)		
					—		
	Date		e PAC (ID#:	)		Amount of Contribution (\$)	<b>Φ10 00</b>
	12/02/2024	Newlan, Nichole					\$10.00
		Contributor address; City; State; Zip Code					
		Austin, TX 78737					
-	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Accounting N			Whole Foods Market	,		
_			I				

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 15/21 Rpt: 18/42	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		y Democratic Party			00016343	,
4	Date	5 Full name of contributor out-of-state PAC (ID#	:)	7	Amount of Contribution (\$)	
	11/02/2024	Parrish, Linda				\$20.00
	ļ	6 Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
Ļ	Drivelasou	Driftwood, TX 78619		Ĺ		
8		ipation / Job title (See Instructions)	9 Employer (See Instructions Not Employed	5)		
	Not Employe			-		
	Date	Full name of contributor out-of-state PAC (ID#)	:)		Amount of Contribution (\$)	±00.00
	11/18/2024					\$20.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	1	Driftwood, TX 78619				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Not Employe		Not Employed	-,		
╞	Date	Full name of contributor out-of-state PAC (ID#:		Т	Amount of Contribution (\$)	
	12/02/2024	Parrish, Linda	·/		Amount of Continuation (+)	\$20.00
	<b>11</b> , 0 = . = .	Contributor address; City; State; Zip Code		•		<b>*</b>
		Driftwood, TX 78619				
	-	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	:d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#	:)	Γ	Amount of Contribution (\$)	
	12/18/2024	Parrish, Linda				\$20.00
	ļ	Contributor address; City; State; Zip Code		1		
	ļ	Driffwood TV 70610				
┝	Drincinal occu	Driftwood, TX 78619 Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	5)		
╞				Т	Amount of Contribution (\$)	
	Date 11/07/2024	Full name of contributor out-of-state PAC (ID#: Rodriguez, Amanda	:)			\$858.97
	11/01/2024	Contributor address; City; State; Zip Code		•		ψ030.51
		Continuutor address, City, State, Zip Code				
	ļ					
		San Marcos, TX 78666				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Council Merr	nber	City of San Marcos			
┢						

	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/21 Rpt: 19/42	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		/ Democratic Party				00016343	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	11/11/2024	Rolfes, Kevin					\$10.00
		6 Contributor address; City; State;	; Zip Code				
		Austin TV 70797					
	Principal occu	Austin, TX 78737 pation / Job title (See Instructions)		9 Employer (See Instructions	<u> </u>		
°	Engineer			Self	)		
╞	Date	Full name of contributor	out-of-state PAC (ID#:		I	Amount of Contribution (\$)	
	12/11/2024	Rolfes, Kevin	001-01-State PAC (ושיה	)			\$10.00
							Ψ10.00
		Contributor address, eng, ende,					
		Austin, TX 78737					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Engineer			Self			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	11/03/2024	Salter, Dayna					\$50.00
		Contributor address; City; State;					
		Buda, TX 78610					
┝	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	 5)		
	Not Employe			Not Employed	,		
╞	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	12/03/2024	Salter, Dayna	. –				\$50.00
		Contributor address; City; State;	; Zip Code				
		Buda, TX 78610					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
╘					<u> </u>		
	Date		out-of-state PAC (ID#:	)		Amount of Contribution (\$)	ቀ10 በበ
	10/29/2024	Smith, Alexandra					\$10.00
		Contributor address; City; State;	Zip Code				
		San Marcos, TX 78666					
$\vdash$	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Research Ac	Iministrator		Texas State University			

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 17/21 Rpt: 20/42	
2 FILER NAME			3 Filer ID (Ethics Commission	n Filers)
	y Democratic Party		00016343	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
11/29/2024				\$10.00
	6 Contributor address; City; State; Zip Code			
	San Marcos, TX 78666			
	upation / Job title (See Instructions)	9 Employer (See Instructions)	)	
Research A	dministrator	Texas State University		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
12/29/2024				\$10.00
	Contributor address; City; State; Zip Code			
	San Marcos, TX 78666			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Research A	dministrator	Texas State University		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
11/23/2024				\$10.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78737			
	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Video Produ		IBM		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
12/23/2024	Smith, Nathan			\$10.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78737	<u> </u>		
-	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Video Produ	ICer	IBM		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
11/12/2024	Soechting, Charles			\$100.00
	Contributor address; City; State; Zip Code			
	San Marcos, TX 78666	<u> </u>		
-	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Attorney		Self		

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 18/21 Rpt: 21/42
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	y Democratic Party		00016343
4 Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7 Amount of Contribution (\$)
12/12/2024	Soechting, Charles		\$100.00
	6 Contributor address; City; State; Zip Code		1
	San Marcos, TX 78666		
8 Principal occu	I pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> s)
Attorney	•	Self	
Date	Full name of contributor out-of-state PAC (ID#		Amount of Contribution (\$)
11/09/2024	Thomas, Kathi	·· <u></u>	\$10.00
			1
	Austin, TX 78737		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Floral Desig	ner & Event Planner	Kathy Thomas Design	
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
12/09/2024	Thomas, Kathi		\$10.00
	Contributor address; City; State; Zip Code		1
	Austin, TX 78737		
	Ipation / Job title (See Instructions)	Employer (See Instructions	\$)
Floral Design	ner & Event Planner	Kathy Thomas Design	
Date	Full name of contributor out-of-state PAC (ID#	¥:)	Amount of Contribution (\$)
11/17/2024	Thompson, Jeff		\$6.00
	Contributor address; City; State; Zip Code		
	Kyle, TX 78640		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
Not Employe		Not Employed	· ·
Date	Full name of contributor Out-of-state PAC (ID#		Amount of Contribution (\$)
12/17/2024	Thompson, Jeff	<sup>†</sup> ,	\$6.00
	Contributor address; City; State; Zip Code		1
	Kyle, TX 78640		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	δ)
Not Employe	ed	Not Employed	

The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 19/21 Rpt: 22/42	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Fi	ilers)
	y Democratic Party		00016343	liere,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
11/02/2024	Trevino, Laurel			\$20.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78737			
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions		
Biologist		University of Texas Aust	.tin	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
10/27/2024	Valdez, Ilsa			\$5.00
	Contributor address; City; State; Zip Code			
	Buda, TX 78610			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
Interpreter		TIN		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
11/03/2024	Verschoyle, Stephen			\$25.00
	Contributor address; City; State; Zip Code		•	
	San Marcos, TX 78666			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	\$)	
Engineer		CMC		
Date	Full name of contributor out-of-state PAC (ID#:	<u>.</u> )	Amount of Contribution (\$)	
11/26/2024	Waller, Lacy			\$10.00
	Contributor address; City; State; Zip Code			
	Kyle, TX 78640			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u>.</u> ;)	
Self-Employ	ed	Self		
Date	Full name of contributor out-of-state PAC (ID#:	<u>.</u> )	Amount of Contribution (\$)	
12/26/2024	Waller, Lacy			\$10.00
	Contributor address; City; State; Zip Code			
	Kyle, TX 78640			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
Self-Employ	ed	Self		

					<u> </u>		
	The Instru	ction Guide explains how to comp	lete this fo	orm.	1	Total pages Schedule A1: Sch: 20/21 Rpt: 23/42	
2	FILER NAME				3	Filer ID (Ethics Commission	ו Filers)
	Hays County	y Democratic Party				00016343	
4	Date	5 Full name of contributor out-of-sta	tate PAC (ID#:	)	7	Amount of Contribution (\$)	
	11/12/2024	Warder, Melissa					\$10.00
		6 Contributor address; City; State; Zip Cod	de				
		1					
		1					
		Austin, TX 78737	r				
8		upation / Job title (See Instructions)	′	9 Employer (See Instructions			
	Global Progr	am Director		ASSA ABLOY Hospitalit	٤y		
	Date	Full name of contributor out-of-sta	.ate PAC (ID#:	)		Amount of Contribution (\$)	
	12/12/2024	Warder, Melissa					\$10.00
		Contributor address; City; State; Zip Cod					
		1					
		1					
<u> </u>		Austin, TX 78737	<del></del>				
		upation / Job title (See Instructions)		Employer (See Instructions			
	Global Progr	am Director		ASSA ABLOY Hospitalit	ïУ		
	Date	Full name of contributor 🔲 out-of-sta	tate PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	11/07/2024	Weems, Jeffry					\$100.00
		Contributor address; City; State; Zip Cod					
		1					
		Wimberley, TX 78676	r		Ļ		
		upation / Job title (See Instructions)		Employer (See Instructions	;)		
	Not Employe			Not Employed	_		
	Date		tate PAC (ID#:	)		Amount of Contribution (\$)	
	12/07/2024	Weems, Jeffry					\$100.00
		Contributor address; City; State; Zip Cod					
		1					
		Wimberley, TX 78676					
┣—	Dringinal occi	upation / Job title (See Instructions)	T	Employer (See Instructions			
	Not Employe	,		Not Employed	9		
⊢					_		
	Date		tate PAC (ID#:	)		Amount of Contribution (\$)	¢10.00
	11/14/2024	Zachrison, Kendra					\$10.00
		Contributor address; City; State; Zip Cod	le				
		1					
		Driftwood, TX 78619					
	Princinal OCCL	upation / Job title (See Instructions)	T	Employer (See Instructions	<u>ا</u>		
	RN			HCA	9		
⊢			l				
1							

ction Guide explains how to complete this f	orm.			
		3 1	-iler ID (Ethics Commission	n Filers)
y Democratic Party				
-	)	7	Amount of Contribution (\$)	
				\$10.00
Driftwood, TX 78619				
	9 Employer (See Instruction	<u> </u>		
		)		
		-		
—	)		Amount of Contribution (\$)	<b>#FO 00</b>
				\$50.00
Contributor address; City; State; Zip Code				
		ıs)		
ed	None			
Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
Zwiener, Erin (The Honorable)				\$500.00
Contributor address; City; State; Zip Code				
Driftwood, TX 78619				
upation / Job title (See Instructions)	Employer (See Instruction	is)		
sentative	Texas House of Repres	senta	tives	
	y Democratic Party          5       Full name of contributor out-of-state PAC (ID#:Zachrison, Kendra         6       Contributor address; City; State; Zip Code         Driftwood, TX 78619         upation / Job title (See Instructions)         Full name of contributor out-of-state PAC (ID#:Zahrn, Sandra         Contributor address; City; State; Zip Code         Austin, TX 78737         upation / Job title (See Instructions)         ed         Full name of contributor out-of-state PAC (ID#:Zahrn, Sandra         Contributor address; City; State; Zip Code         Austin, TX 78737         upation / Job title (See Instructions)         ed         Full name of contributor out-of-state PAC (ID#:         Zwiener, Erin (The Honorable)         Contributor address; City; State; Zip Code         Driftwood, TX 78619         upation / Job title (See Instructions)	y Democratic Party         5       Full name of contributor         _Zachrison, Kendra         6       Contributor address; City; State; Zip Code	ction Guide explains how to complete this form.       3         g       Democratic Party       3         5       Full name of contributor	Sch: 21/21 Rpt: 24/42         Sch: 21/21 Rpt: 24/42         3       Filer ID (Ethics Commission 00016343         5       Full name of contributor

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

	The Instruction Guide explains ho	w to complete this f	orm.	Total pages Schedule A2: Sch: 1/1 Rpt: 25/42			
2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Hays County Democratic Party				00016343		
4	TOTAL OF UNITEMIZED IN-KIND P	\$					
5	Date       6       Full name of contributor         11/01/2024       Word Place Properties         7       Contributor address; City; S	8	Amount of <b>9</b> In-kind contribution contribution (\$) description \$5,000.00 Imputed rent for campaign headquarters				
	Buda, TX 78610				Check if travel outside of Texas. Complete Schedule T.		
10	Principal occupation / Job title (FOR NON-JUI)	DICIAL) (See instructions)	11 Employer (FOR NON-	-JU	IDICIAL) (See instructions)		
12	2 Contributor's principal occupation (FOR JUDI	CIAL)	13 Contributor's job title (FOR JUDICIAL) (See instructions)				
14	4 Contributor's employer/law firm (FOR JUDICI/	AL)	<b>15</b> Law firm of contributo	or's	spouse (if any) (FOR JUDICIAL)		
16	<b>6</b> If contributor is a child, law firm of parent(s) (if	f any) (FOR JUDICIAL)					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	· · ·			2	Filer ID (Ethics Commission Filers)		
1	Sch: 1/17 Rpt: 26/42	2	Hays County Democratic Party			3	00016343		
4	Date	5	Payee name						
	10/30/2024		ActBlue						
6	Amount (\$)	7		Zip Co	le				
	\$129.63		PO Box 441146						
			Somerville, MA 02144						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	(aluba	(b) Description				
	OF		Solicitation/Fundraising Expense	uule)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE		5 1				, officeholder living expense		
					Online Donat	ion	Fees		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name O	ffice sou	Jht		Office held		
	Date		Payee name						
	11/06/2024		ActBlue						
_	Amount (\$)	┝	Payee address; City; State;	Zip Co	le				
	\$10.89		PO Box 441146	210 000					
	ψ10.05		0 000 441140						
			Somerville, MA 02144						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	dule)	(b) Description				
	OF EXPENDITURE		Solicitation/Fundraising Expense				ide of Texas. Complete Schedule T.		
							, officeholder living expense		
					Online Donat	lon	Fees		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice sou	Jht		Office held		
	Date		Payee name						
	11/14/2024		ActBlue						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$9.52		PO Box 441146	p 000					
	\$0.0 <u>2</u>								
			Somerville, MA 02144						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	dule)	(b) Description				
	OF		Solicitation/Fundraising Expense	,		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE		5 1		Check if Austin	, TX,	, officeholder living expense		
					Online Donat	tion	Fees		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice sou	Iht		Office held		
⊢									

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Fees C Food/Beverage Expense F Gift/Awards/Memorials Expense F	Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	· · · · ·			2	Filer ID (Ethics Commission Filers)		
1	Sch: 2/17 Rpt: 27/42	2	Hays County Democratic Party				00016343		
4	Date	5	Payee name						
	11/20/2024		ActBlue						
6	Amount (\$)	7		Zip Cod	e				
	\$15.13		PO Box 441146						
			Somerville, MA 02144						
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedu		b) Description				
	OF		Solicitation/Fundraising Expense	uic)		outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE		5				officeholder living expense		
					Online Donat	tion	Fees		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Offi	fice soug	ht		Office held		
	Date		Payee name						
	11/27/2024		ActBlue						
_	Amount (\$)		Payee address; City; State;	Zip Cod	e				
	\$2.39		PO Box 441146	210 000	C				
	ψ2.55								
			Somerville, MA 02144						
	PURPOSE	(a)	Category (See Categories listed at the top of this schedu	ule) (	b) Description				
	OF EXPENDITURE		Solicitation/Fundraising Expense				de of Texas. Complete Schedule T.		
							officeholder living expense		
					Online Donat	lion	Fees		
					-				
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name Off	fice soug	ht		Office held		
	Date		Payee name						
	12/04/2024		ActBlue						
	Amount (\$)		Payee address; City; State;	Zip Cod	e				
	\$5.32		PO Box 441146	2.0 000	0				
	\$0.0 <u>2</u>								
			Somerville, MA 02144						
	PURPOSE	(a)	Category (See Categories listed at the top of this schedu	ule)	b) Description				
	OF		Solicitation/Fundraising Expense			outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE		5		Check if Austin	I, TX	officeholder living expense		
					Online Donat	tion	Fees		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Off	fice soug	ht		Office held		
⊢									

		EXPE	NDITURE CATEGOR	IES FOR B	OX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	nittee Legal Servic	ige Expense Memorials Expense	Office Overhea Polling Expens Printing Expens Salaries/Wages	se s/Contract Labor	Travel in District Travel Out of Dis	quipment & Related Expense			
1	Total pages Schedule F1:		• • • •			3 Filer ID	(Ethics Commission Filers)			
1	Sch: 3/17 Rpt: 28/42	lays County Democ	ratic Party			00016343	()			
4	Date 12/11/2024	Payee name ActBlue								
6	Amount (\$) \$8.32	7 Payee address; City; State; Zip Code         8.32 PO Box 441146         Somerville, MA 02144								
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense       (b) Description         Image: Check if taxel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Online Donation Fees										
9	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder ı	name O	office sought		Office he	eld			
	Date	ayee name								
	12/18/2024	ActBlue								
	Amount (\$)Payee address;City;State;Zip Code\$36.03PO Box 441146									
	PURPOSE OF EXPENDITURE	Somerville, MA 0214 Category <sub>(See Categories</sub> Solicitation/Fundrais	listed at the top of this sche	edule) (b)		outside of Texas. Com , TX, officeholder living ion Fees				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder ı	name O	office sought		Office he	eld			
	Date	ayee name								
	12/26/2024	ActBlue								
	Amount (\$) \$10.13	Payee address; Ci PO Box 441146	ty; State;	Zip Code						
		Somerville, MA 0214	14							
	PURPOSE OF EXPENDITURE	Category <sub>(See Categorie</sub> Solicitation/Fundrais		edule) (b)		outside of Texas. Com , TX, officeholder living ion Fees				
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder ı	name O	ffice sought		Office he	eld			

			EXPENDITURE	CATEGOF	RIES FOR	BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex ee Legal Services The Instruction Guid		Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2 FII				•	2	Filer ID	(Ethics Commission Filers)	
-	Sch: 4/17 Rpt: 29/42		ys County Democratic Par	ty				00016343		
4	Date 11/15/2024		yee name mstrong, Katy							
6	Amount (\$) \$25.85									
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement       (b) Description 							expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder name	C	Office sou	ht		Office he	eld	
	Date	Pa	yee name							
	10/29/2024	Ba	rton Publications Inc.							
	Amount (\$) \$795.50									
		Ку	le, TX 78640							
	PURPOSE OF EXPENDITURE		tegory (See Categories listed at the nting Expense	top of this sch	edule)		n, TX,	ide of Texas. Com , officeholder livinç		
	Complete ONLY if direct expenditure to benefit C/OF		didate/Officeholder name	C	Dffice sou	ht		Office he	eld	
	Date	Pa	yee name							
	11/07/2024	Be	an, Jerritt							
	Amount (\$) \$350.00		yee address; City; 00 Kohler's Crossing	State;	; Zip Coo	le				
			le, TX 78640							
	PURPOSE OF EXPENDITURE		tegory (See Categories listed at the ent Expense	top of this sch	edule)		n, TX,	ide of Texas. Com , officeholder living :ion night eve	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder name	C	Office sou	ht		Office he	eld	

		EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)								
1	Total pages Schedule F1:	2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)								
	Sch: 5/17 Rpt: 30/42	Hays County Democratic Party	00016343								
4	Date 11/15/2024	5 Payee name Cetinq, Charles									
6	Amount (\$) \$13.86	7 Payee address; City; State; Zip Code 106 Lakeview Ct. Kyle, TX 78640									
<ul> <li>8 PURPOSE OF EXPENDITURE</li> <li>(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement</li> <li>(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimburse for printing costs</li> </ul>											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	10/29/2024	Five Guys									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$121.39	151 Evans Kyle, TX 78640									
	PURPOSE OF EXPENDITURE	Check if Austin,	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Refreshments for meeting								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	10/29/2024	Five Guys									
	Amount (\$) \$42.34	Payee address; City; State; Zip Code 151 Evans									
		Kyle, TX 78640									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense s for Meeting								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Award Imittee Legal Ser	erage Expense Is/Memorials Expense	Office Overhea Polling Expens Printing Expen Salaries/Wage	se s/Contract Labor	Travel in District Travel Out of Dis	quipment & Related Expense				
1	Total pages Schedule F1:					3 Filer ID	(Ethics Commission Filers)				
	Sch: 6/17 Rpt: 31/42	Hays County Demo	ocratic Party			00016343					
4	Date 11/15/2024	Payee name Five Guys									
		-	City; State;	Zip Code							
6	Amount (\$) \$145.66	7 Payee address; City; State; Zip Code 151 Evans Kyle, TX 78640									
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Refreshments for crew cleaning out headquart							expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholde	r name C	office sought		Office he	łd				
	Date	Payee name									
	10/29/2024	Foarde, Hannah									
	Amount (\$)	Payee address;	City; State;	Zip Code							
	\$250.00	125 Polk Kyle, TX 78640									
	PURPOSE OF EXPENDITURE	Category <sub>(See Categor</sub> Event Expense	ies listed at the top of this sche	<sub>edule)</sub> (b)	Check if Austin	outside of Texas. Com , TX, officeholder living or precinct even	expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholde	r name C	office sought		Office he	ld				
	Date	Payee name									
	10/30/2024	ForrReal, Ltd.									
	Amount (\$) \$275.00	Payee address; 0 215 W. San Antoni	-	Zip Code							
		San Marcos, TX 78	3666								
	PURPOSE OF EXPENDITURE	Category <sub>(See Categor</sub> Office Overhead/R	ies listed at the top of this sche ental Expense	edule) (b)		outside of Texas. Com					
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholde	r name C	Office sought		Office he	ld				

			EXPENDITURE C	CATEGOR	RIES FOR	8 BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp ittee Legal Services The Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor	se	Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2 F	LER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 7/17 Rpt: 32/42		ays County Democratic Party	/			_	00016343			
4	Date 11/06/2024		ayee name orrReal, Ltd.								
6	Amount (\$) \$325.00	2:	Payee address; City; State; Zip Code 215 W. San Antonio Street San Marcos, TX 78666								
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Office Austin, TX, officeholder living expense Rent									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ndidate/Officeholder name	C	Office sou	ght		Office he	ld		
	Date	P	ayee name								
	11/15/2024	F	orrReal, Ltd.								
	Amount (\$) \$275.00		ayee address; City; 15 W. San Antonio Street	State;	; Zip Co	de					
	PURPOSE OF EXPENDITURE	<b>(a)</b> C	an Marcos, TX 78666 ategory (See Categories listed at the to ffice Overhead/Rental Expen		edule)		avel outsi	de of Texas. Com officeholder living			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	ght		Office he	łd		
	Date	P	ayee name	_				-			
	12/04/2024		orrReal, Ltd.								
	Amount (\$) \$325.00		ayee address; City; 15 W. San Antonio Street	State;	; Zip Co	de					
			an Marcos, TX 78666								
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the to fice Overhead/Rental Expen		edule)		avel outsi	de of Texas. Comp officeholder living			
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Dffice sou	ght		Office he	ld		

			EXPENDITURE CATEGORIES	S FOR E	OX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Off Food/Beverage Expense Pol Gift/Awards/Memorials Expense Pri	fice Overhe olling Expen inting Expe alaries/Wag	nse es/Contract Labor		Travel in District Travel Out of Distric	ipment & Related Expense		
1	Total pages Schedule F1:	2				2	Filer ID (	Ethics Commission Filers)		
T	Sch: 8/17 Rpt: 33/42		Hays County Democratic Party				00016343			
4	Date 12/23/2024		Payee name ForrReal, Ltd.							
6	Amount (\$) \$275.00	7 Payee address; City; State; Zip Code         275.00       215 W. San Antonio Street         San Marcos, TX 78666								
8	PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense       (b) Description         Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Rent									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	e sough	t		Office held			
	Date		Payee name							
	11/13/2024		Gemstone Palace							
	Amount (\$)		Payee address; City; State; Zi	ip Code						
	\$2,850.00 1101 Bunton Creek Road									
			Suite 200 Kyle, TX 78640							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule Event Expense	<sub>e)</sub> (b	Check if Austin,	, TX,	de of Texas. Comple officeholder living ex on night event	pense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	e sough	t		Office held			
	Date		Payee name							
	11/06/2024		GoFish Advertising							
	Amount (\$) \$378.88		Payee address; City; State; Zi 19315 FM 2252 Suite 312 Garden Ridge, TX 78266	ip Code						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule Advertising Expense	<sub>e)</sub> (b		, тх,	de of Texas. Comple officeholder living ex I <b>nsert</b>			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	e sough	t		Office held			

			EXPENDITURE CAT	EGORIES F	OR	BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				nead/Rental Expense ense ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)				
	Sch: 9/17 Rpt: 34/42		Hays County Democratic Party00016343									
4	Date	5	Payee name									
	11/06/2024		GoFish Advertising									
6	Amount (\$)	7	Payee address; City; State; Zip Code									
	\$974.25		19315 FM 2252									
			Suite 312									
		Garden Ridge, TX 78266										
8	PURPOSE	(a)	-			b) Description						
ľ	OF	(4)	Category (See Categories listed at the top of Advertising Expense	this schedule)	ľ		outsi	ide of Texas. Complete Schedule T.				
	EXPENDITURE					Check if Austin	ı, тх,	, officeholder living expense				
						Work prepar	ing	Insert				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	Office s	oug	ht		Office held				
	Date		Payee name									
	11/01/2024		Google									
	Amount (\$)		Payee address; City;	State; Zip	Cod	e						
	\$84.43 1600 Amphitheater Parkway											
			Mountain View, CA 94003									
	PURPOSE OF	(a)	Category (See Categories listed at the top of	this schedule)	(	b) Description						
	EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T.				
								, officeholder living expense				
						Online Servi						
	Complete ONIL V if direct		Condidate/Officebolder.neme	Office		ht		Office hold				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office s	oug	in the second		Office held				
		i –										
	Date		Payee name									
	12/02/2024		Google									
	Amount (\$)		Payee address; City;	State; Zip	Cod	e						
	\$84.43		1600 Amphitheater Parkway									
			Mountain View, CA 94003									
-	PURPOSE	(a)	Category (See Categories listed at the top of	this schedule)	(	b) Description						
	OF		Office Overhead/Rental Expense		ľ		outsi	ide of Texas. Complete Schedule T.				
	EXPENDITURE					Check if Austin	η, TX	, officeholder living expense				
						Online Servi	ces					
	Complete ONLY if direct		Candidate/Officeholder name	Office s	oug	ht		Office held				
	expenditure to benefit C/OI	-1										

			EXPENDITURE CATEG	ORIES FOR	R BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Ove Polling Ex Printing Ex Salaries/M	xpense Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	· · · · · · · · · · · · · · · · · · ·			3	Filer ID (Ethics Commission Filers)		
_	Sch: 10/17 Rpt: 35/42		Hays County Democratic Party			<u> </u>	00016343		
4	Date	5	Payee name						
	11/25/2024		Hiscox c/o George Torres Agency						
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip Co	ode				
	\$87.05		112 Cimarron Place #B						
		Buda, TX 78610							
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b) Description				
	OF EXPENDITURE		Office Overhead/Rental Expense				de of Texas. Complete Schedule T.		
						ΤX,	officeholder living expense		
					Insurance				
_	Complete ONIL V if direct		Condidate/Officeholder name	Office cou	l		Office held		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	igni		Office held		
	Date		Payee name						
	12/24/2024		Hiscox c/o George Torres Agency						
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	ode				
	\$87.05 112 Cimarron Place #B								
			Buda, TX 78610						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this : Office Overhead/Rental Expense	schedule)	(b) Description	outsi	de of Texas. Complete Schedule T.		
	EXPENDITORE					ΤX,	officeholder living expense		
					Insurance				
	Complete ONIL V if direct		Condidate/Officeholder.nome	Office cou	l		Office held		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	JUIL		Onice heid		
	Date		Payee name						
	11/04/2024		Kessler, Austin						
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	ode				
	\$347.00		349 Billie Brooks	····, [· ···					
	-								
			Driftwood, TX 78619						
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b) Description				
	OF EXPENDITURE		Loan Repayment/Reimbursement				de of Texas. Complete Schedule T.		
					Reimburse fo		officeholder living expense		
						۰p	ostage		
	Complete ONLY if direct	Ļ	Candidate/Officeholder name	Office sou	l		Office held		
	expenditure to benefit C/OF			Unice sou	JUIIL				

EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Credit Card Payment			Fees         Office Overhead/Rental Expense         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense         Polling Expense           By -         Gift/Awards/Memorials Expense         Printing Expense					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	,	
	Sch: 11/17 Rpt: 36/42		Hays County Democratic Party					00016343		
4	Date	5	Payee name							
	11/07/2024		Narvaiz, Damien							
6	Amount (\$)	7	Payee address; City; State	; Zip Co	de					
	\$350.00		1700 Kohler's Crossing							
			Kyle, TX 78640							
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description				
	EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.		
								, officeholder living expense ion night event		
							000			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ght			Office held		
	Date		Payee name							
	12/10/2024		Roughhouse Brewing							
	Amount (\$) Payee address; City; State; Zip Code									
	\$500.00 680 Oakwood Loop									
			San Marcos, TX 78666							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description		ide of Taura - Ormalate Cabadada T		
	EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T. , officeholder living expense		
Reservation fee for SDEC event										
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	aht			Office held	$\neg$	
	expenditure to benefit C/Oł				gin					
_	Data								—	
	Date 10/30/2024		Payee name Scale to Win							
_				7: 0					-	
	Amount (\$)			; Zip Co	de					
	\$744.49		13742 Harper St							
			Santa Ana, CA 92703							
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Texting Services					ide of Texas. Complete Schedule T.		
	-							, officeholder living expense		
						Texting Servi	665			
	Complete ONILV & diversit	Ļ	Condidate/Offical-alder acro-	Office				Office held	_	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ynt			Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Commit Credit Card Payment			FeesOffice OverlFood/Beverage ExpensePolling ExpenseGift/Awards/Memorials ExpensePrinting Exp	Rental Expense Ti Ti Ti Contract Labor O	ravel in District ravel Out of Dist	uipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME		<b>3</b> F	iler ID	(Ethics Commission Filers)	
	Sch: 12/17 Rpt: 37/42		Hays County Democratic Party			0016343	``````````````````````````````````````	
4	Date 11/06/2024		Payee name Scale to Win					
6	Amount (\$) \$2,173.17		Payee address; City; State; Zip Cod 13742 Harper St Santa Ana, CA 92703	le				
8	8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Texting Services       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Texting for GOTV activities							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Office soug	ht		Office he	d	
	Date		Payee name					
	11/07/2024		Scale to Win					
	Amount (\$) \$415.24		Payee address; City; State; Zip Cod 13742 Harper St	le				
			Santa Ana, CA 92703					
PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Texting Services       (b) Description         Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting for GOTV efforts								
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Office soug		Office he	d		
	Date		Payee name					
	11/08/2024		Scott, Sheri					
	Amount (\$) \$750.00		Payee address; City; State; Zip Cod 16 Shady Bluff Ct.	le				
			Wimberley, TX 78676					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)	[	Description Check if travel outside Check if Austin, TX, off Postage reimburse	ficeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name Office soug	ht		Office he	d	

	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     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gitt/Awards/Memorials Expense     Printing Expense       Legal Services     Salaries/Wages/Contract Labor			Transpo Travel i Travel (	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2					3 Filer II		(Ethics Commission F	ilers)
-	Sch: 13/17 Rpt: 38/42		Hays County Demo	cratic Party			0001			1013)
4	Date	5	Payee name							
	10/29/2024		Spectrum							
6	Amount (\$)	7	Payee address; C	ity; State;	Zip Co	le				
	\$225.58		750 Barnes, Suite 1	.30						
			San Marcos, TX 78	666						
8	PURPOSE									
ð	OF	(a)	Category (See Categoria		edule)	b) Description	outside of Tex	as Com	plete Schedule T.	
	EXPENDITURE		Office Overhead/Re	entai Expense		Check if Austir				
									aign headquarters	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder	name C	Dffice soug	ht	0	ffice he	ld	
	Date		Payee name							
	10/30/2024		Spectrum							
	Amount (\$)	-	•	ity; State;	Zip Co					
	\$80.30		750 Barnes, Suite 1							
	φου.30		750 Bames, Suite 1	.50						
			San Marcos, TX 78	666						
	PURPOSE	(a)	Category (See Categorie	es listed at the top of this sch	edule)	<b>b)</b> Description				
	OF EXPENDITURE		Office Overhead/Re	ental Expense					plete Schedule T.	
						Check if Austir				
						internet for S		5 0110	C	
	Complete ONIL V if direct		Candidate/Officeholder			b+		fficaba		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF									
		-								
	Date 11/29/2024		Payee name							
			Spectrum							
	Amount (\$)		-		Zip Coo	le				
	\$225.58		750 Barnes, Suite 1	.30						
			San Marcos, TX 78	666						
	PURPOSE	(a)	Category (See Categorie	es listed at the top of this sch	edule)	<b>b)</b> Description				
	OF EXPENDITURE		Office Overhead/Re		ŗ				plete Schedule T.	
	EXPENDITORE					Check if Austir				
						Internet and	cable at h	ieadqu	larters	
	Complete ONLY if direct		Candidate/Officeholder	name C	Office soug	ht	0	ffice he	ld	
	expenditure to benefit C/OI	-								

EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			-		Office Ove Polling Exp Printing Ex Salaries/W	rheac pense pens ages	e /Contract Labor		Travel in District Travel Out of Dist	quipment & Related Expense
The Instruction Guide explains how to complete this form.         1 Total pages Schedule F1:       2 FILER NAME       3 Filer ID								Filer ID	(Ethics Commission Filers)	
T	Sch: 14/17 Rpt: 39/42	2							00016343	
4	Date	5	Payee name							
	12/02/2024		Spectrum							
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	de				
	\$80.30		750 Barnes, Suite 130							
			San Marcos, TX 78666							
8	PURPOSE	(a)	Category (See Categories listed at the top	-646-1	(a dula)	(b)	Description			
	OF	(,	Office Overhead/Rental Expens		iedule)	(~)		outsi	de of Texas. Comp	lete Schedule T.
	EXPENDITURE						Check if Austin	, тх,	officeholder living	expense
							Internet at off	fice		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	(	Office sou	ght			Office he	ld
	Date		Payee name							
	12/30/2024		Spectrum							
	Amount (\$)		Payee address; City;	State	; Zip Co	de				
\$80.30 750 Barnes, Suite 130										
	\$00.00		Too Dames, Suite 100							
			San Marcos, TX 78666							
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	nedule)	(b)	Description			
	OF EXPENDITURE Office Overhead/Rental Expense									
							Internet at off		officenolder living	expense
							internet at on	ice		
	Complete ONIL V if direct		Candidate/Officeholder name		Office sour	ht			Office he	Id
Complete <u>ONLY</u> if direct expenditure to benefit C/O				C	JIIICE SOUĮ	JIII			Onice ne	iu
_	Data									
	Date 11/05/2024		Payee name Strand, Liz							
				<u> </u>						
	Amount (\$)	Payee address; City; State; Zip Code								
	\$63.00		16201 Oak Grove Road							
	Buda, TX 78620									
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	nedule)	(b)	Description			
	OF EXPENDITURE		Loan Repayment/Reimburseme	ent					de of Texas. Comp	
									officeholder living	expense
							Reimburse fo	or P	ostage	
	Complete ONLY if direct		Candidate/Officeholder name	C	Office sou	ght			Office he	ld
	expenditure to benefit C/OI	1								

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees         Office           Food/Beverage Expense         Pollin           Gift/Awards/Memorials Expense         Printin	e Overhe ng Expen ing Exper ries/Wage	nse es/Contract Labor	Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME		3	Filer ID	(Ethics Commission Filers)	
	Sch: 15/17 Rpt: 40/42		Hays County Democratic Party			00016343	``````````````````````````````````````	
4	Date 11/12/2024		Payee name Travis County Democratic Party					
6	Amount (\$) \$13,508.30		Payee address; City; State; Zip P.O. Box 684263 Austin, TX 78768	Code				
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Payment for share of Central Texas Organizer							expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Office	sought		Office he	ld	
	Date		Payee name					
	10/31/2024		Tyson Fundraising LLC					
	Amount (\$)		Payee address; City; State; Zip	Code				
	\$1,200.00		P.O. Box 1390 Kyle, TX 78640					
PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense       (b) Description 								
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Office :	sought	:	Office he	ld	
	Date		Payee name					
	10/29/2024		USPS					
	Amount (\$) \$365.00		Payee address; City; State; Zip 555 Veterans Dr	Code				
			Kyle, TX 78640					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense	(b)		tside of Texas. Comp X, officeholder living AillerS		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Office	sought		Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursemen Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1										
1	Sch: 16/17 Rpt: 41/42	Hays County Democratic Party	3         Filer ID         (Ethics Commission Filers)           00016343         00016343							
4	Date	Payee name	•							
	12/30/2024	Weems, Jeff								
6	Amount (\$)       7       Payee address;       City;       State;       Zip Code         \$57.38       514 Cypress Creek Lane									
		Wimberley, TX 78676								
8	PURPOSE OF EXPENDITURE	OF Get Check if travel outside of Texas. Complete Schedule T.								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	11/06/2024	Word Place Properties								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$252.62	201 Marietta's Way Buda, TX 78610								
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense leadquarters							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	12/05/2024	Word Place Properties								
	Amount (\$) \$184.70	Payee address;City;State;Zip Code201 Marietta's Way								
		Buda, TX 78610								
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense leadquarters							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							