

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers) 00087886		2 Total pages filed: 347		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Averie Danielle	MI MI	ELECTRONICALLY FILED 01/13/2025	
	NICKNAME	LAST Bishop	SUFFIX		
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Date Hand-delivered or Date Postmarked	
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit			
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		Receipt #	Amount
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)		Date Processed	
5 ORIGINAL PERIOD COVERED	Month Day Year 01/01/2024	THROUGH	Month Day Year 06/30/2024	Date Imaged	

6 EXPLANATION OF CORRECTION
This report is being corrected to correct a contributors name.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Ms. Averie Danielle Bishop

Signature of Candidate or Officeholder

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00087886	2 Total pages filed: 347				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Averie Danielle	MI MI	OFFICE USE ONLY			
	NICKNAME	LAST Bishop	SUFFIX		Date Received ELECTRONICALLY FILED 01/13/2025		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 819 W Arapaho Road #233 Suite 24B Richardson, TX 75080		ZIP CODE	Date Hand-delivered or Date Postmarked			
				Receipt #			
				Amount			
				Date Processed			
				Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Bernadette	MI MI				
	NICKNAME	LAST Bondoc	SUFFIX				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 2021 Burnside Drive		APT / SUITE #;	CITY; STATE; ZIP CODE			
	Allen, TX 75013						
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(214)	973-9460					
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)						
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)						
9 PERIOD COVERED	Month	Day	Year	Month	Day	Year	
	01	01	2024	THROUGH	06	30	2024
10 ELECTION	ELECTION DATE		ELECTION TYPE				
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
	11	05	2024	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)			
				State Representative District 112			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Bishop, Averie Danielle (Ms.) **14** Filer ID (Ethics Commission Filers)
00087886

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	192,470.15
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	3,396.05
	4. TOTAL POLITICAL EXPENDITURES	\$	71,800.62
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	106,140.68
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 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.

Ms. Averie Danielle Bishop

Signature of Candidate or Officeholder

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 Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Bishop, Averie Danielle (Ms.)		19 Filer ID (Ethics Commission Filers) 00087886
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 148,100.69
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 44,369.46
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 71,740.62
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 60.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/295 Rpt: 5/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aberly, Naomi	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Boston, MA 02114-4212		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aberly, Naomi	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Boston, MA 02114-4212		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abrams, Judy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77006-5512		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self employed
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Glenn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Mckinney, TX 75072-4210		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Glenn Adams
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Glenn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Mckinney, TX 75072-4210		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Glenn Adams

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/295 Rpt: 6/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Glenn	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Mckinney, TX 75072-4210		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Glenn Adams
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Glenn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Mckinney, TX 75072-4210		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Glenn Adams
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Glenn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Mckinney, TX 75072-4210		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Glenn Adams
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Judy	Amount of Contribution (\$) \$14.00
Contributor address; City; State; Zip Code Houston, TX 77006-5512		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self employed
Date 06/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Judy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77006-5512		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/295 Rpt: 7/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Victoria	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Fort Worth, TX 76109-1131		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adcock, Daniel	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Lubbock, TX 79411-1804		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adell, Alexander	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Austin, TX 78746-1545		
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Alexander Adell
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agnew, Virginia	Amount of Contribution (\$) \$20.83
Contributor address; City; State; Zip Code Austin, TX 78703-4126		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Herring & Irwin L.L.P.
Date 05/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguilar, Michael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Whittier, CA 90604-1957		
Principal occupation / Job title (See Instructions) CNA		Employer (See Instructions) PIH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/295 Rpt: 8/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akana, Wayne Keola	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Kailua, HI 96734-3839		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert, Celia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code York, ME 03909-5865		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Kimberly	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Brookshire, TX 77423-2206		
Principal occupation / Job title (See Instructions) Labor Management Specialist		Employer (See Instructions) Sunrise Senior Living
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Kimberly	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Brookshire, TX 77423-2206		
Principal occupation / Job title (See Instructions) Labor Management Specialist		Employer (See Instructions) Sunrise Senior Living
Date 03/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Kimberly	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Brookshire, TX 77423-2206		
Principal occupation / Job title (See Instructions) Labor Management Specialist		Employer (See Instructions) Sunrise Senior Living

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/295 Rpt: 9/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Kimberly <hr/> 6 Contributor address; City; State; Zip Code Brookshire, TX 77423-2206	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Labor Management Specialist		9 Employer (See Instructions) Sunrise Senior Living
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Kimberly <hr/> Contributor address; City; State; Zip Code Brookshire, TX 77423-2206	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Labor Management Specialist		Employer (See Instructions) Sunrise Senior Living
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Kimberly <hr/> Contributor address; City; State; Zip Code Brookshire, TX 77423-2206	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Labor Management Specialist		Employer (See Instructions) Sunrise Senior Living
Date 03/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexandrakis, Ellen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-2201	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Academic Facilitator		Employer (See Instructions) Richardson ISD
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alford, Jeanne <hr/> Contributor address; City; State; Zip Code Kamuela, HI 96743	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/295 Rpt: 10/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alilonu, Chidimma <hr/> 6 Contributor address; City; State; Zip Code Santa Monica, CA 90401-2216	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Paralegal		9 Employer (See Instructions) Dovel & Luner
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Karen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3039	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Optometrist		Employer (See Instructions) Self employed
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Karen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3039	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Optometrist		Employer (See Instructions) Self employed
Date 03/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Karen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3039	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Optometrist		Employer (See Instructions) Self employed
Date 04/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Karen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3039	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Optometrist		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/295 Rpt: 11/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Karen <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248-3039	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Optometrist		9 Employer (See Instructions) Self employed
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Karen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3039	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Optometrist		Employer (See Instructions) Self employed
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Karen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3039	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Optometrist		Employer (See Instructions) Self employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, Shelley <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006-2729	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allyn, Tammy <hr/> Contributor address; City; State; Zip Code Houston, TX 77077-6501	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/295 Rpt: 12/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allyn, Tammy	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Houston, TX 77077-6501		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amatucci, James	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Nashua, NH 03062-3725		
Principal occupation / Job title (See Instructions) Field Sales		Employer (See Instructions) Water
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ames, Eva	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code West Bloomfield, MI 48323-2459		
Principal occupation / Job title (See Instructions) Supply Chain Consultant		Employer (See Instructions) DSV
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amos, Naomi	Amount of Contribution (\$) \$7.50
Contributor address; City; State; Zip Code Desert Hot Springs, CA 92241-9460		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anand, Diane	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Los Angeles, CA 90027-1118		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/295 Rpt: 13/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anchondo, Daniel	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Dallas, TX 75240-5802		
8 Principal occupation / Job title (See Instructions) Musician		9 Employer (See Instructions) Self employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andersen, Ruth E	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78748-2552		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self employed
Date 05/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Jim	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Garland, TX 75044-2052		
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Jim D. Anderson
Date 03/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrade, Alex	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75225-7638		
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Bulle Rock
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrade, Gabriela	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Franklin Square, NY 11010-1803		
Principal occupation / Job title (See Instructions) Law Clerk		Employer (See Instructions) Law Office of Bibiana Andrade

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/295 Rpt: 14/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Gary	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Honolulu, HI 96815-3938		
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) DeTect Inc.
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Gary	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Honolulu, HI 96815-3938		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) DeTect Inc.
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Gary	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Honolulu, HI 96815-3938		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) DeTect Inc.
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Gary	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Honolulu, HI 96815-3938		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) DeTect Inc.
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Gary	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Honolulu, HI 96815-3938		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) DeTect Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/295 Rpt: 15/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Gary <hr/> 6 Contributor address; City; State; Zip Code Honolulu, HI 96815-3938	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) DeTect Inc.
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Jerry <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019-4544	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office of Jerry D. Andrews PC
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appleton, Robert <hr/> Contributor address; City; State; Zip Code College Station, TX 77845-4601	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas A&M
Date 05/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Araujo, Carlos <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-3635	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Celestica
Date 04/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Archer, Christian <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212-3409	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Archer Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/295 Rpt: 16/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Sam	7 Amount of Contribution (\$) \$4.17
6 Contributor address; City; State; Zip Code Austin, TX 78753-5739		
8 Principal occupation / Job title (See Instructions) Recruiter		9 Employer (See Instructions) Liaison Resources
Date 05/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arrowsmith, Marie	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75218-2148		
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) Sandia National Labs
Date 05/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Steve	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Dallas, TX 75252-5104		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atlas, Scott	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Houston, TX 77098-1002		
Principal occupation / Job title (See Instructions) Legal consultant		Employer (See Instructions) Self employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atwood, Jeff	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code El Cerrito, CA 94530-3729		
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/295 Rpt: 17/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aubert, Rachel	7 Amount of Contribution (\$) \$115.96
	6 Contributor address; City; State; Zip Code Dallas, TX 75235-8315	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avnery, Susie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75248-2954	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aycock, Edward	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Sanger, TX 76266-7457	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Azua, Ramon	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Mansfield, TX 76063-5104	
Principal occupation / Job title (See Instructions) Sr. Reactor Inspector		Employer (See Instructions) U.S. Nuclear Regulatory Commission
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bacher, Pam	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Ashburn, VA 20147-5715	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/295 Rpt: 18/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baird, Marilyn	7 Amount of Contribution (\$) \$12.00
6 Contributor address; City; State; Zip Code Downers Grove, IL 60516-2052		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Shawn	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Denton, TX 76209-1366		
Principal occupation / Job title (See Instructions) Audio Producer		Employer (See Instructions) Self employed
Date 04/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Shawn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Denton, TX 76209-1366		
Principal occupation / Job title (See Instructions) Audio Producer		Employer (See Instructions) Self employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banul, Wendy	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Richardson, TX 75080-1818		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self employed
Date 03/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Vicki	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Richardson, TX 75080-2541		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/295 Rpt: 19/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Jeffrey <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080-1836	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) None
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartsch, Carol <hr/> Contributor address; City; State; Zip Code League City, TX 77573-2018	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Associate Professor		Employer (See Instructions) UTMB
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Jerry <hr/> Contributor address; City; State; Zip Code Surfside Beach, TX 77541-9447	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Jerry <hr/> Contributor address; City; State; Zip Code Surfside Beach, TX 77541-9447	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Jerry <hr/> Contributor address; City; State; Zip Code Surfside Beach, TX 77541-9447	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/295 Rpt: 20/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Jerry	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Surfside Beach, TX 77541-9447		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Jerry	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Surfside Beach, TX 77541-9447		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Jerry	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Surfside Beach, TX 77541-9447		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Jerry	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Surfside Beach, TX 77541-9447		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Laura	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75254-2723		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/295 Rpt: 21/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Laura	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Dallas, TX 75254-2723		
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Self employed
Date 03/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Laura	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75254-2723		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self employed
Date 04/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Laura	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75254-2723		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self employed
Date 03/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bastien, Denise	Amount of Contribution (\$) \$4.25
Contributor address; City; State; Zip Code Waterford, MI 48329-2215		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batdorf, Joseph	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Houston, TX 77077-2926		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) J Turner Research

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/295 Rpt: 22/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazzle, Cheryl <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75206-2902	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazzle, Cheryl <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206-2902	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bear, Eric <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-3427	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) HyperWatt Productions
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Larry <hr/> Contributor address; City; State; Zip Code Denton, TX 76209-1550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Tim <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75010-4056	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HR Director		Employer (See Instructions) Match Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/295 Rpt: 23/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Tim <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75010-4056	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) HR Director		9 Employer (See Instructions) Match Group
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Tim <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75010-4056	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HR Director		Employer (See Instructions) Match Group
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Thomas <hr/> Contributor address; City; State; Zip Code Grover Beach, CA 93433-1118	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Self employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bedi, Harjaneet <hr/> Contributor address; City; State; Zip Code Spring, TX 77389-1540	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Kelsey-Seybold
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belgrad, Richard <hr/> Contributor address; City; State; Zip Code Bozeman, MT 59715-8061	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/295 Rpt: 24/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Carol	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Abilene, TX 79601-5407		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Carol	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Abilene, TX 79601-5407		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellows, Bambi	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Chicago, IL 60625-1821		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben-Poorat, Suzan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Milwaukee, WI 53217-5207		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bentley, Casara	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brenham, TX 77833-5116		
Principal occupation / Job title (See Instructions) Customer service representative		Employer (See Instructions) Pirate Ship

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/295 Rpt: 25/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkenkamp, Marie <hr/> 6 Contributor address; City; State; Zip Code Boerne, TX 78006-5906	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkenkamp, Marie <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006-5906	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkenkamp, Marie <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006-5906	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkenkamp, Marie <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006-5906	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkenkamp, Marie <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006-5906	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/295 Rpt: 26/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkenkamp, Marie	7 Amount of Contribution (\$) \$6.00
	6 Contributor address; City; State; Zip Code Boerne, TX 78006-5906	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkman, Steven	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Lewisville, TX 75056-5535	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berman, Betsy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Atlanta, GA 30306-4527	
Principal occupation / Job title (See Instructions) General Contractor		Employer (See Instructions) Self employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berman, Betsy	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code Atlanta, GA 30306-4527	
Principal occupation / Job title (See Instructions) General Contractor		Employer (See Instructions) Self employed
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernard, Bruce	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Cincinnati, OH 45220-1667	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/295 Rpt: 27/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bersin, Colby	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Grapevine, TX 76051-2796		
8 Principal occupation / Job title (See Instructions) Manufacturing		9 Employer (See Instructions) Texas Instruments
Date 03/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bersin, Colby	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Grapevine, TX 76051-2796		
Principal occupation / Job title (See Instructions) Manufacturing		Employer (See Instructions) Texas Instruments
Date 03/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bersin, Colby	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Grapevine, TX 76051-2796		
Principal occupation / Job title (See Instructions) Manufacturing		Employer (See Instructions) Texas Instruments
Date 04/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bersin, Colby	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Grapevine, TX 76051-2796		
Principal occupation / Job title (See Instructions) Manufacturing		Employer (See Instructions) Texas Instruments
Date 05/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bersin, Colby	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Grapevine, TX 76051-2796		
Principal occupation / Job title (See Instructions) Manufacturing		Employer (See Instructions) Texas Instruments

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/295 Rpt: 28/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bersin, Colby <hr/> 6 Contributor address; City; State; Zip Code Grapevine, TX 76051-2796	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Manufacturing		9 Employer (See Instructions) Texas Instruments
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besson, Jonathan <hr/> Contributor address; City; State; Zip Code Pittsburg, CA 94565-7926	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) Oracle USA
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besson, Jonathan <hr/> Contributor address; City; State; Zip Code Pittsburg, CA 94565-7926	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) Oracle USA
Date 03/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besson, Jonathan <hr/> Contributor address; City; State; Zip Code Pittsburg, CA 94565-7926	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) Oracle USA
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besson, Jonathan <hr/> Contributor address; City; State; Zip Code Pittsburg, CA 94565-7926	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) Oracle USA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/295 Rpt: 29/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besson, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Pittsburg, CA 94565-7926	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) IT Consultant		9 Employer (See Instructions) Oracle USA
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besson, Jonathan <hr/> Contributor address; City; State; Zip Code Pittsburg, CA 94565-7926	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) Oracle USA
Date 01/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beyer, Samuel <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-3418	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) General Dynamics
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beyer, Samuel <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-3418	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) General Dynamics
Date 03/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beyer, Samuel <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-3418	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) General Dynamics

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/295 Rpt: 30/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beyer, Samuel	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Richardson, TX 75080-3418		
8 Principal occupation / Job title (See Instructions) Mechanical Engineer		9 Employer (See Instructions) General Dynamics
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beyer, Samuel	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Richardson, TX 75080-3418		
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) General Dynamics
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beyer, Samuel	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Richardson, TX 75080-3418		
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) General Dynamics
Date 06/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhatt, Bhuvanesh	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Antonio, TX 78210-1411		
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) Wolfram Research
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bianco, Joseph	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Sun City Center, FL 33573-7045		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/295 Rpt: 31/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billingsley, Lindsay <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75209-5619	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Alliance Residential
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Binder, Gale <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76088-8812	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Jean <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-6366	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Roslyn Public Schools
Date 02/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Jean <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-6366	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Roslyn Public Schools
Date 03/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Linda <hr/> Contributor address; City; State; Zip Code Woodbine, MD 21797-8302	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Books		Employer (See Instructions) CPB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/295 Rpt: 32/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Christine	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Carbondale, CO 81623-3153		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blake, Jack E.	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code Midland, TX 79701-4123		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Navigator Oil & Minerals Inc
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloch, Sara	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75204-7124		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumson, Diane	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Ann Arbor, MI 48104-4341		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blust, Christina	Amount of Contribution (\$) \$7.14
Contributor address; City; State; Zip Code Washington, DC 20016-2102		
Principal occupation / Job title (See Instructions) Admin		Employer (See Instructions) Cypress

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/295 Rpt: 33/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobbitt, Lisa	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Conroe, TX 77302-4723		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boduch, Carol	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Malta, NY 12020-3259		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Barbara	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Elgin, TX 78621-6485		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bastrop County
Date 03/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Billie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Richardson, TX 75081-4535		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Billie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Richardson, TX 75081-4535		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/295 Rpt: 34/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bond, Oliver <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731-5824	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bond, Oliver <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-5824	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borges, Kimberly <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-3649	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PWR WMN
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borges, Kimberly <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-3649	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PWR WMN
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borges, Kimberly <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-3649	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PWR WMN

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/295 Rpt: 35/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borges, Kimberly <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75220-3649	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) PWR WMN
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bosovik, Olia <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-3351	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Edward Jones
Date 03/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bousbar, Sabrina <hr/> Contributor address; City; State; Zip Code Largo, FL 33770-4607	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brand, Gary <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-3525	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Fiserv
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brand, Gary <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-3525	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Fiserv

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/295 Rpt: 36/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brand, Gary <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75044-3525	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) Fiserv
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Ashlynn <hr/> Contributor address; City; State; Zip Code Denton, TX 76209-3534	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Program manager		Employer (See Instructions) N/A
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Bev <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Bev <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Bev <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/295 Rpt: 37/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Bev <hr/> 6 Contributor address; City; State; Zip Code Schertz, TX 78154	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Bev <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Bev <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breedlove, Scott <hr/> Contributor address; City; State; Zip Code Katy, TX 77449-2819	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Britt, Eric <hr/> Contributor address; City; State; Zip Code Arlington, TX 76010-2123	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/295 Rpt: 38/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brodsky, Nina	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Austin, TX 78731-4719		
8 Principal occupation / Job title (See Instructions) bookkeeper and artist		9 Employer (See Instructions) Self employed
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Lynn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Indian River, MI 49749-9633		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Lynn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Indian River, MI 49749-9633		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Lynn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Indian River, MI 49749-9633		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Lynn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Indian River, MI 49749-9633		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/295 Rpt: 39/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Lynn	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Indian River, MI 49749-9633		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Lynn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Indian River, MI 49749-9633		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broome, Christopher	Amount of Contribution (\$) \$3.13
Contributor address; City; State; Zip Code Baltimore, MD 21218-3414		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Tradeswell
Date 06/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brosnihan, Kerry	Amount of Contribution (\$) \$2.08
Contributor address; City; State; Zip Code Austin, TX 78738-5009		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Debbie	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Boulder, CO 80304-4372		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/295 Rpt: 40/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Debbie	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Boulder, CO 80304-4372		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Debbie	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Boulder, CO 80304-4372		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Michael	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Dallas, TX 75209-2421		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UTSW Med Center
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Randy	Amount of Contribution (\$) \$17.50
Contributor address; City; State; Zip Code Orlando, FL 32804-7122		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Karen	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Corpus Christi, TX 78404-2412		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/295 Rpt: 41/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brzezinski, David <hr/> 6 Contributor address; City; State; Zip Code Ann Arbor, MI 48108-1329	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Barbara <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2054	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bufkin, Judith <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-1711	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Small business owner		Employer (See Instructions) Self employed
Date 04/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bufkin, Judith <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-1711	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Small business owner		Employer (See Instructions) Self employed
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bufkin, Judith <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-1711	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Small business owner		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/295 Rpt: 42/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bufkin, Judith <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005-1711	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Small business owner		9 Employer (See Instructions) Self employed
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bufkin, Judith <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-1711	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Small business owner		Employer (See Instructions) Self employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bufkin, Judith <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-1711	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Small business owner		Employer (See Instructions) Self employed
Date 05/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bumpas, Carol <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-5503	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Aaron <hr/> Contributor address; City; State; Zip Code Houston, TX 77003-4821	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) District Director		Employer (See Instructions) Texas House of Representatives

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/295 Rpt: 43/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnam, Lon <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76102-7501	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burt, Thomas <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1493	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HR Director		Employer (See Instructions) Children's Medical Center Dallas
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burt, Thomas <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1493	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) HR Director		Employer (See Instructions) Children's Medical Center Dallas
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Lesley <hr/> Contributor address; City; State; Zip Code Plano, TX 75093-3108	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Lesley Butler
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butz, Alaine <hr/> Contributor address; City; State; Zip Code Houston, TX 77096-2119	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/295 Rpt: 44/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cabanas, Debra <hr/> 6 Contributor address; City; State; Zip Code Philadelphia, PA 19119-2911	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) Project Director		9 Employer (See Instructions) PAREXEL
Date 05/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cabatingan, Mabel <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77498-6320	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cain, Chris <hr/> Contributor address; City; State; Zip Code Austin, TX 78702-2906	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Blackbaud
Date 03/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, Alex <hr/> Contributor address; City; State; Zip Code Fayetteville, AR 72701-5195	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, Jana <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260-6034	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Acupuncture		Employer (See Instructions) Jana Caldwell

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/295 Rpt: 45/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, Nancy	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Dallas, TX 75206-6625		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callaway, TJ	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Richardson, TX 75081-5335		
Principal occupation / Job title (See Instructions) Audio Engineer		Employer (See Instructions) TJ Callaway Audio Inc.
Date 03/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, Frank	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Kilgore, TX 75663-0273		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, Frank	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Kilgore, TX 75663-0273		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, Roberta	Amount of Contribution (\$) \$3.50
Contributor address; City; State; Zip Code Philadelphia, PA 19147-1927		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/295 Rpt: 46/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Larry <hr/> 6 Contributor address; City; State; Zip Code Branson, MO 65616-9110	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canaris, Cynthia <hr/> Contributor address; City; State; Zip Code Butler, OH 44822-9674	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlock, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-5513	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Nancy <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676-6379	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caslin, Heather <hr/> Contributor address; City; State; Zip Code Houston, TX 77096-4905	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Faculty		Employer (See Instructions) University of Houston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/295 Rpt: 47/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cespedes, Carol	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Austin, TX 78736-3100		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 02/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cespedes, Carol	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Austin, TX 78736-3100		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cespedes, Carol	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Austin, TX 78736-3100		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cespedes, Carol	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Austin, TX 78736-3100		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cespedes, Carol	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Austin, TX 78736-3100		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/295 Rpt: 48/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cespedes, Carol	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Austin, TX 78736-3100		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 06/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Sharon	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Colleyville, TX 76034-5008		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chang, Alicia	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75244-8011		
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Alicia Chang
Date 03/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chao, David	Amount of Contribution (\$) \$6.25
Contributor address; City; State; Zip Code Austin, TX 78759-6123		
Principal occupation / Job title (See Instructions) Self-employed		Employer (See Instructions) Self employed
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaplin Kyzer, Abigail	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Corinth, TX 76210-0057		
Principal occupation / Job title (See Instructions) Piano teacher		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/295 Rpt: 49/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Scott D. <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75044-2828	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Julia <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95833-3214	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nonprofit		Employer (See Instructions) Hopewell Fund
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopherson, Lauren <hr/> Contributor address; City; State; Zip Code Argyle, TX 76226-2565	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Security Communications		Employer (See Instructions) Sprinklr inc
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Churchill, Laura <hr/> Contributor address; City; State; Zip Code Plano, TX 75093-6967	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Bank of America
Date 03/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Alexander <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206-5415	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Haynes and Boone LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/295 Rpt: 50/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Laura <hr/> 6 Contributor address; City; State; Zip Code Denver, CO 80203-3058	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Assistant General Manager		9 Employer (See Instructions) Transdev
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouston, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-3411	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sessions, Israel & Shartle
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouston, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-3411	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sessions, Israel & Shartle
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, Larry <hr/> Contributor address; City; State; Zip Code Rockport, TX 78382-6958	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Retired
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Barry <hr/> Contributor address; City; State; Zip Code New York, NY 10024-1512	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/295 Rpt: 51/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Claire <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230-1725	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self Employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Elton <hr/> Contributor address; City; State; Zip Code Austin, TX 78745-1750	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78756-2820	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 03/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, John <hr/> Contributor address; City; State; Zip Code Garland, TX 75040-3362	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, John <hr/> Contributor address; City; State; Zip Code Garland, TX 75040-3362	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/295 Rpt: 52/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, John <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75040-3362	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, John <hr/> Contributor address; City; State; Zip Code Garland, TX 75040-3362	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Comroe, Jacque <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1534	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Comuzzi, Kristen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-8201	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Marketing Advertising		Employer (See Instructions) REELPeople Co LLC
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cones, Marian <hr/> Contributor address; City; State; Zip Code Houston, TX 77055-4110	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/295 Rpt: 53/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Chris <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90005-3611	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooney, Frank <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081-3626	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Carol <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2425	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Training		Employer (See Instructions) Self employed
Date 01/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Danielle <hr/> Contributor address; City; State; Zip Code Lexington, NC 27295-7973	Amount of Contribution (\$) \$36.10
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornish, Sonda <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-5551	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) COTA		Employer (See Instructions) PAM Medical

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/295 Rpt: 54/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corpuz, Victor <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248-5641	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Jackson Lewis PC
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cory, Wendy <hr/> Contributor address; City; State; Zip Code Incline Village, NV 89450-5062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coutts, Jane <hr/> Contributor address; City; State; Zip Code Santa Fe, NM 87506-2119	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coutts, Jane <hr/> Contributor address; City; State; Zip Code Santa Fe, NM 87506-2119	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self Employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covell, Lawrence <hr/> Contributor address; City; State; Zip Code Castle Rock, CO 80108-3489	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/295 Rpt: 55/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Claudia <hr/> 6 Contributor address; City; State; Zip Code Hurley, WI 54534-9207	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Claudia <hr/> Contributor address; City; State; Zip Code Hurley, WI 54534-9207	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Claudia <hr/> Contributor address; City; State; Zip Code Hurley, WI 54534-9207	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Claudia <hr/> Contributor address; City; State; Zip Code Hurley, WI 54534-9207	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Martin <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-3001	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/295 Rpt: 56/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crimmel, Randall	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Modesto, CA 95350-4850		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronin, Marissa	Amount of Contribution (\$) \$5.10
Contributor address; City; State; Zip Code Bellerose, NY 11426-1648		
Principal occupation / Job title (See Instructions) Fellow		Employer (See Instructions) McKinsey & Company
Date 03/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuellar, Susan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75248-2834		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuellar, Susan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75248-2834		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culp, Phyllis	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Cloverdale, CA 95425-5441		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/295 Rpt: 57/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Katherine <hr/> 6 Contributor address; City; State; Zip Code Naples, FL 34105-4522	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Harrison LLP
Date 01/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuny, Yvette <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95825-0251	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuny, Yvette <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95825-0251	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 03/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuny, Yvette <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95825-0251	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuny, Yvette <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95825-0251	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/295 Rpt: 58/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuny, Yvette	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Sacramento, CA 95825-0251		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 06/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuny, Yvette	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Sacramento, CA 95825-0251		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cupaioli, Charlotte	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Garland, TX 75044-2145		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Libby	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Sarasota, FL 34239-6342		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curts, Rosemary	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code Dallas, TX 75211-5529		
Principal occupation / Job title (See Instructions) public school teacher		Employer (See Instructions) Dallas ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/295 Rpt: 59/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curts, Rosemary <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75211-5529	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) public school teacher		9 Employer (See Instructions) Dallas ISD
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Agostino, Phillip <hr/> Contributor address; City; State; Zip Code Ware, MA 01082-9753	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daigle, Scott <hr/> Contributor address; City; State; Zip Code Austin, TX 78726-1309	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Public Policy Director		Employer (See Instructions) Texas Council for Developmental Disabilities
Date 06/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Damplo, Susan <hr/> Contributor address; City; State; Zip Code New York, NY 10012-1003	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Jerald <hr/> Contributor address; City; State; Zip Code Austin, TX 78758-7922	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) State employee		Employer (See Instructions) Tx Dept of Licensing and Regulation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/295 Rpt: 60/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Jerald <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78758-7922	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) State employee		9 Employer (See Instructions) Tx Dept of Licensing and Regulation
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Jerald <hr/> Contributor address; City; State; Zip Code Austin, TX 78758-7922	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) State employee		Employer (See Instructions) Tx Dept of Licensing and Regulation
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Jerald <hr/> Contributor address; City; State; Zip Code Austin, TX 78758-7922	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) State employee		Employer (See Instructions) Tx Dept of Licensing and Regulation
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Jerald <hr/> Contributor address; City; State; Zip Code Austin, TX 78758-7922	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) State employee		Employer (See Instructions) Tx Dept of Licensing and Regulation
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Jerald <hr/> Contributor address; City; State; Zip Code Austin, TX 78758-7922	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) State employee		Employer (See Instructions) Tx Dept of Licensing and Regulation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/295 Rpt: 61/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DasGupta, Bhaskar <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60607-3029	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) UIC
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davies, Valerie <hr/> Contributor address; City; State; Zip Code Bellingham, WA 98225-7367	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, John <hr/> Contributor address; City; State; Zip Code Bellingham, WA 98229-2347	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 03/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Joseph <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-1731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Geologist		Employer (See Instructions) Kalnin Ventures
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Joseph <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-1731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Geologist		Employer (See Instructions) Kalnin Ventures

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/295 Rpt: 62/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Lisa <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230-5049	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Business owner		9 Employer (See Instructions) Kim Dawson Agency
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Camp, Jacqueline <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2809	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Los Santos, Christina <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-4385	Amount of Contribution (\$) \$16.67
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeRosa, Steve <hr/> Contributor address; City; State; Zip Code Austin, TX 78750-2047	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeRosa, Steve <hr/> Contributor address; City; State; Zip Code Austin, TX 78750-2047	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/295 Rpt: 63/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeRosa, Steve	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Austin, TX 78750-2047		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeRosa, Steve	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78750-2047		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeRosa, Steve	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78750-2047		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeRosa, Steve	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78750-2047		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deutsch, Barry	Amount of Contribution (\$) \$2.78
Contributor address; City; State; Zip Code Portland, OR 97266-4744		
Principal occupation / Job title (See Instructions) Cartoonist		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/295 Rpt: 64/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devin, Michael	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Richardson, TX 75081-3122		
8 Principal occupation / Job title (See Instructions) Data scientist		9 Employer (See Instructions) Birkeland Current
Date 06/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devore, Michael	Amount of Contribution (\$) \$5.56
Contributor address; City; State; Zip Code Naperville, IL 60540-4917		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dewar, Claire	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Dallas, TX 75209-5615		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillman, Bruce	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Overland Park, KS 66204-2705		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillman, Bruce	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Overland Park, KS 66204-2705		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/295 Rpt: 65/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillman, Bruce	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Overland Park, KS 66204-2705		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillman, Bruce	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Overland Park, KS 66204-2705		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillman, Bruce	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Overland Park, KS 66204-2705		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillman, Bruce	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Overland Park, KS 66204-2705		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dinwiddie, Sandra	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77062-4424		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/295 Rpt: 66/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dion, Megan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78744	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Philanthropy Officer		9 Employer (See Instructions) Texas Civil Rights Project
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dixon, Dennis <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78253-5960	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dlugach, Art <hr/> Contributor address; City; State; Zip Code Meadowlakes, TX 78654-7111	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sportswriter		Employer (See Instructions) The Llano News
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodson, Kyle <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75067-7431	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Software Engineer II		Employer (See Instructions) Abalta Technology Inc
Date 01/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doe, Jennie <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070-6006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CPA CFE		Employer (See Instructions) Self employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/295 Rpt: 67/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doe, Jennie <hr/> 6 Contributor address; City; State; Zip Code Spring Branch, TX 78070-6006	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CPA CFE		9 Employer (See Instructions) Self employed
Date 03/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doe, Jennie <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070-6006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CPA CFE		Employer (See Instructions) Self employed
Date 04/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doe, Jennie <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070-6006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CPA CFE		Employer (See Instructions) Self employed
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doe, Jennie <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070-6006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CPA CFE		Employer (See Instructions) Self employed
Date 06/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doe, Jennie <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070-6006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CPA CFE		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/295 Rpt: 68/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donatto, Michelle	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Keller, TX 76248-4938		
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) The Southern Etiquette Society
Date 04/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donovan, Carol	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75214-2672		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Carol Crabtree Donovan
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doody, Dave	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Altadena, CA 91001-3717		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NASA
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doody, Dave	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Altadena, CA 91001-3717		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NASA
Date 03/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doody, Dave	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Altadena, CA 91001-3717		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NASA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/295 Rpt: 69/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doody, Dave <hr/> 6 Contributor address; City; State; Zip Code Altadena, CA 91001-3717	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) NASA
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doody, Dave <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001-3717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NASA
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doody, Dave <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001-3717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NASA
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dover, Clayton <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218-2321	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Velvet Taco
Date 03/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drazner, Laurie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-7004	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/295 Rpt: 70/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dubroff, Philip	7 Amount of Contribution (\$) \$175.00
6 Contributor address; City; State; Zip Code Doylestown, PA 18902-9767		
8 Principal occupation / Job title (See Instructions) Designer		9 Employer (See Instructions) PMDI SIGNS
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, William	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Austin, TX 78727-1701		
Principal occupation / Job title (See Instructions) Product development consultant		Employer (See Instructions) Self employed
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, William	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78727-1701		
Principal occupation / Job title (See Instructions) Product development consultant		Employer (See Instructions) Self employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, William	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78727-1701		
Principal occupation / Job title (See Instructions) Product development consultant		Employer (See Instructions) Self employed
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunnewold, Jane	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Kyle, TX 78640-4303		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/295 Rpt: 71/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunnewold, Jane <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640-4303	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self employed
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunnewold, Jane <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-4303	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self employed
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunnewold, Jane <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-4303	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self employed
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunnewold, Jane <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-4303	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunnewold, Jane <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-4303	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/295 Rpt: 72/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duplessis, Elena	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Waban, MA 02468-1325		
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Found domerville
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Julia	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Denton, TX 76208-4501		
Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Julia Dyer
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Julia	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Denton, TX 76208-4501		
Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Julia Dyer
Date 03/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Julia	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Denton, TX 76208-4501		
Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Julia Dyer
Date 04/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Julia	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Denton, TX 76208-4501		
Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Julia Dyer

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/295 Rpt: 73/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Julia <hr/> 6 Contributor address; City; State; Zip Code Denton, TX 76208-4501	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Filmmaker		9 Employer (See Instructions) Julia Dyer
Date 06/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Julia <hr/> Contributor address; City; State; Zip Code Denton, TX 76208-4501	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Julia Dyer
Date 03/22/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00193433) EMILY's List <hr/> Contributor address; City; State; Zip Code Washington, DC 20036-5862	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddy, Nancy <hr/> Contributor address; City; State; Zip Code Houston, TX 77068-1206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Baylor College of Medicine
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddy, Nancy <hr/> Contributor address; City; State; Zip Code Houston, TX 77068-1206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Baylor College of Medicine

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/295 Rpt: 74/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddy, Nancy <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77068-1206	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Baylor College of Medicine
Date 04/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddy, Nancy <hr/> Contributor address; City; State; Zip Code Houston, TX 77068-1206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Baylor College of Medicine
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddy, Nancy <hr/> Contributor address; City; State; Zip Code Houston, TX 77068-1206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Baylor College of Medicine
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddy, Nancy <hr/> Contributor address; City; State; Zip Code Houston, TX 77068-1206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Baylor College of Medicine
Date 04/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrhardt, Harryette <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-5516	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Politician		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/295 Rpt: 75/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eickmeyer, Janet	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Richardson, TX 75080-2324		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ekezie, Janet	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Antonio, TX 78245-1283		
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) San Antonio Area Foundation
Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ekezie, Janet	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Antonio, TX 78245-1283		
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) San Antonio Area Foundation
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ekezie, Janet	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Antonio, TX 78245-1283		
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) San Antonio Area Foundation
Date 04/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ekezie, Janet	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Antonio, TX 78245-1283		
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) San Antonio Area Foundation

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/295 Rpt: 76/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ekezie, Janet	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78245-1283		
8 Principal occupation / Job title (See Instructions) Associate		9 Employer (See Instructions) San Antonio Area Foundation
Date 06/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ekezie, Janet	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Antonio, TX 78245-1283		
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) San Antonio Area Foundation
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Molly	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Craryville, NY 12521-5556		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) None
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Vicki	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Garland, TX 75044-2065		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellison, Rochelle	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Austin, TX 78753-5112		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/295 Rpt: 77/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elphingstone, Scott <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205-1530	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elphingstone, Scott <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-1530	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, Lawrence <hr/> Contributor address; City; State; Zip Code National City, CA 91950-4121	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emory, Marc <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-1727	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Heritage Capital Corporation		Employer (See Instructions) Director Of Overseas Operations
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engel, Patricia <hr/> Contributor address; City; State; Zip Code Graton, CA 95444	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) Potter		Employer (See Instructions) Self employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/295 Rpt: 78/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, Robert	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Arlington, TX 76012-5767		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 03/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enloe, Ted and Bess	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75219-5544		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Balquita Partners Ltd.
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esparza, Eveette	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Chicago, IL 60707-3329		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estabrook, Helen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77019-3540		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ettinger, Penny	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Grand Blanc, MI 48439-2022		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/295 Rpt: 79/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Steffanie <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205-1714	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Interior Designer		9 Employer (See Instructions) Rutherfords Design
Date 05/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Steffanie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-1714	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Interior Designer		Employer (See Instructions) Rutherfords Design
Date 06/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eve, Jenny <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-3670	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabrizio, Michael <hr/> Contributor address; City; State; Zip Code Kansas City, MO 64111-3808	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farber, Shola <hr/> Contributor address; City; State; Zip Code East Hampton, NY 11937-2439	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/295 Rpt: 80/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farnsworth, Effa <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78253-6507	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farr, Gerald <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-5129	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, Kimberly <hr/> Contributor address; City; State; Zip Code Allen, TX 75013-2999	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fay, Anne <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208-2948	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) GM		Employer (See Instructions) WRMC
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fehr, Stefan <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-6136	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Austin Public Health

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feigenbaum, Andrew <hr/> 6 Contributor address; City; State; Zip Code Irving, TX 75062-3782	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Freelance		9 Employer (See Instructions) Andrew Feigenbaum
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feldman, Linda <hr/> Contributor address; City; State; Zip Code Elkins Park, PA 19027-2953	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fernandes, Gary <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-5923	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Field, Megan <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-4430	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Field, Stephen <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606-5551	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) Trinity University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/295 Rpt: 82/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Field, Stephen <hr/> 6 Contributor address; City; State; Zip Code Blanco, TX 78606-5551	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) professor		9 Employer (See Instructions) Trinity University
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Field, Stephen <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606-5551	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) Trinity University
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fikes, Amy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-3103	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fikes, Amy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-3103	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fikes, Amy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-3103	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/295 Rpt: 83/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fink, Sara <hr/> 6 Contributor address; City; State; Zip Code Ann Arbor, MI 48103-1462	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) Fitness instructor		9 Employer (See Instructions) Ann Arbor YMCA
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Claire <hr/> Contributor address; City; State; Zip Code Baytown, TX 77523-9899	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Tech		Employer (See Instructions) ER
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Claire <hr/> Contributor address; City; State; Zip Code Baytown, TX 77523-9899	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Tech		Employer (See Instructions) ER
Date 03/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Claire <hr/> Contributor address; City; State; Zip Code Baytown, TX 77523-9899	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Tech		Employer (See Instructions) ER
Date 04/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Claire <hr/> Contributor address; City; State; Zip Code Baytown, TX 77523-9899	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Tech		Employer (See Instructions) ER

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/295 Rpt: 84/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Claire <hr/> 6 Contributor address; City; State; Zip Code Baytown, TX 77523-9899	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Tech		9 Employer (See Instructions) ER
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Claire <hr/> Contributor address; City; State; Zip Code Baytown, TX 77523-9899	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Tech		Employer (See Instructions) ER
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Nancy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2144	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self Employed
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Nancy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2144	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self Employed
Date 01/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Nancy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2144	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/295 Rpt: 85/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Nancy <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75044-2144	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Bookkeeper		9 Employer (See Instructions) Self Employed
Date 03/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Nancy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2144	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self Employed
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Nancy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2144	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self Employed
Date 04/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Nancy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2144	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self Employed
Date 04/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Nancy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2144	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/295 Rpt: 86/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Nancy <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75044-2144	7 Amount of Contribution (\$) \$72.66
8 Principal occupation / Job title (See Instructions) Bookkeeper		9 Employer (See Instructions) Self Employed
Date 05/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Nancy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2144	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self Employed
Date 06/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Nancy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2144	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self Employed
Date 03/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisk, Susan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75254-8645	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzgerald, Stefani <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78404-1703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales - clothing		Employer (See Instructions) Self employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/295 Rpt: 87/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzgerald, Stefani <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78404-1703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Sales - clothing		9 Employer (See Instructions) Self employed
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzwater, Linda <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613-2534	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Andrea <hr/> Contributor address; City; State; Zip Code Cedar Hill, TX 75104-3255	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Organizer		Employer (See Instructions) MOVE Texas
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Dalton <hr/> Contributor address; City; State; Zip Code Robstown, TX 78380-2223	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) TAMUCC
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Mary <hr/> Contributor address; City; State; Zip Code Robstown, TX 78380-2223	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Diagnostician		Employer (See Instructions) Robstown

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/295 Rpt: 88/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores III, Frank <hr/> 6 Contributor address; City; State; Zip Code Robstown, TX 78380-2223	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Aubrey <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238-2650	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SLP		Employer (See Instructions) Self employed
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Deb <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-3349	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Deb <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-3349	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fomel, Sergey <hr/> Contributor address; City; State; Zip Code Austin, TX 78759-3748	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) The University of Texas at Austin

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/295 Rpt: 89/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forde, Mercy <hr/> 6 Contributor address; City; State; Zip Code Los Altos, CA 94024-4930	7 Amount of Contribution (\$) \$26.00
8 Principal occupation / Job title (See Instructions) Fitness		9 Employer (See Instructions) YMCA
Date 04/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forde, Mercy <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94024-4930	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Fitness		Employer (See Instructions) YMCA
Date 05/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forde, Mercy <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94024-4930	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Fitness		Employer (See Instructions) YMCA
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forehand, Amie <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006-1907	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sourcing Manager		Employer (See Instructions) Charles Schwab
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forney, Jan <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-4403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Geophysicist		Employer (See Instructions) Swift Energy

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/295 Rpt: 90/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Anne <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080-4903	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Self employed
Date 05/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Shannon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-5337	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Due Diligence Analyst		Employer (See Instructions) Fidelity Investments
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frampton, Robert <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91104-2966	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Boeing
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franco, Aaron <hr/> Contributor address; City; State; Zip Code Victoria, TX 77904-6001	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Financial Center Manager		Employer (See Instructions) Frost Bank
Date 02/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franco, Aaron <hr/> Contributor address; City; State; Zip Code Victoria, TX 77904-6001	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Financial Center Manager		Employer (See Instructions) Frost Bank

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/295 Rpt: 91/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franco, Aaron	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Victoria, TX 77904-6001		
8 Principal occupation / Job title (See Instructions) Financial Center Manager		9 Employer (See Instructions) Frost Bank
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franco, Aaron	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Victoria, TX 77904-6001		
Principal occupation / Job title (See Instructions) Financial Center Manager		Employer (See Instructions) Frost Bank
Date 03/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franey, Lisa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Mansfield, TX 76063-2565		
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Veterans Administration
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franey, Lisa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Mansfield, TX 76063-2565		
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Veterans Administration
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklin, Paul	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Fort Worth, TX 76244-6529		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) City of Fort Worth

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman, Lily <hr/> 6 Contributor address; City; State; Zip Code Lawrenceville, NJ 08648-1624	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Froiland Gridley, Linda <hr/> Contributor address; City; State; Zip Code Roseville, MN 55113-1830	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Image Consultant		Employer (See Instructions) Mrs.
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fronk, Jordan <hr/> Contributor address; City; State; Zip Code Austin, TX 78735-6348	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Fronks
Date 03/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Amy <hr/> Contributor address; City; State; Zip Code Portland, OR 97213-2352	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Tax preparer		Employer (See Instructions) Self employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fussell, Jill <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633-5248	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gabriel, John <hr/> 6 Contributor address; City; State; Zip Code Minneapolis, MN 55409-1215	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Home Depot
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gagon, Charlene <hr/> Contributor address; City; State; Zip Code Manchaca, TX 78652-5640	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallardo, Jessica <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-3804	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Frank <hr/> Contributor address; City; State; Zip Code Longview, TX 75601-4914	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Grant administrator		Employer (See Instructions) Self employed
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galvan, Hilda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-4841	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jones Day

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ganguly, Ashika	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Austin, TX 78703-3790		
8 Principal occupation / Job title (See Instructions) Candidate		9 Employer (See Instructions) Ashika for Austin
Date 06/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Domingo	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75247-5028		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law offices of Domingo Garcia
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia MD, Catalina E	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75231-2215		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Daniel	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Conroe, TX 77306-7771		
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, John Henry	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Poteet, TX 78065-4170		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gause, George <hr/> 6 Contributor address; City; State; Zip Code McAllen, TX 78501-8954	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gay, Derrik <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-5524	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ryan Law Firm
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Carla <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75056-3940	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Systemware Professional Serices
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-1962	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) None
Date 05/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geoffray, Jeanne <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-1029	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Faith	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Austin, TX 78734-1663		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, John	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Bryan, TX 77801-3713		
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) Self-Employed
Date 02/22/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00540443) Giffords PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Washington, DC 20091		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gigl, Jennifer	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75248-4308		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gigl, Jennifer	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75248-4308		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/295 Rpt: 97/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert, Mary	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code Sonoma, CA 95476-4584		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillingham, James	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Boerne, TX 78006-8590		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillis, Charles	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Richardson, TX 75080-2343		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Platt Richmond
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ginsbach, Mary	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Hot Springs, SD 57747-1511		
Principal occupation / Job title (See Instructions) Marketing Manager		Employer (See Instructions) National Capital Bank
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, George	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78746-5586		
Principal occupation / Job title (See Instructions) Clinical social worker		Employer (See Instructions) Self employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/295 Rpt: 98/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, George <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746-5586	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Clinical social worker		9 Employer (See Instructions) Self employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glassner, Sharon <hr/> Contributor address; City; State; Zip Code Morton Grove, IL 60053-1562	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gleason, Vince <hr/> Contributor address; City; State; Zip Code Leander, TX 78641-2228	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) None
Date 06/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, John <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-6033	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sheiness Glover & Grossman LLP
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glynn, Kathy <hr/> Contributor address; City; State; Zip Code Northbrook, IL 60062-7534	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Gap resources LLP

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/295 Rpt: 99/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glynn, Kathy	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code Northbrook, IL 60062-7534		
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Gap resources LLP
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glynn, Kathy	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Northbrook, IL 60062-7534		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Gap resources LLP
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glynn, Kathy	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Northbrook, IL 60062-7534		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Gap resources LLP
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glynn, Kathy	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Northbrook, IL 60062-7534		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Gap resources LLP
Date 06/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glynn, Kathy	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Northbrook, IL 60062-7534		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Gap resources LLP

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/295 Rpt: 100/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gober, Kenneth <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759-4427	7 Amount of Contribution (\$) \$8.33
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Lee Gober & Reyna
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godfrey, Justin <hr/> Contributor address; City; State; Zip Code Austin, TX 78721-2544	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Vice President/Treasurer		Employer (See Instructions) Barilla Management Inc
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godfrey, Justin <hr/> Contributor address; City; State; Zip Code Austin, TX 78721-2544	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Vice President/Treasurer		Employer (See Instructions) Barilla Management Inc
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godfrey, Justin <hr/> Contributor address; City; State; Zip Code Austin, TX 78721-2544	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Vice President/Treasurer		Employer (See Instructions) Barilla Management Inc
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goerner, Jon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-4109	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Going, John <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77040-2903	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Surveyor		9 Employer (See Instructions) None
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goins, Cynthia <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701-4122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) physician assistant		Employer (See Instructions) UTMB
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldin, John <hr/> Contributor address; City; State; Zip Code Guilford, CT 06437-2528	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldman, Wendy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-4709	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self employed
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldwater, Joe and Cheryl <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-7338	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/295 Rpt: 102/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldwater, Joe and Cheryl <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75044-7338	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Marisa <hr/> Contributor address; City; State; Zip Code New York, NY 10028-2759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Fordham University
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonterman, Steve <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-4242	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Gabriella <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-2980	Amount of Contribution (\$) \$40.37
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Marsha <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-4011	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/295 Rpt: 103/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosewehr, Rocio <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75034-4284	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Snellings Law PLLC
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Deborah <hr/> Contributor address; City; State; Zip Code Littleton, MA 01460-1203	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray Zeller, Sandra <hr/> Contributor address; City; State; Zip Code Plano, TX 75025-7014	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) real estate appraiser		Employer (See Instructions) Frisco Lender Services LLC
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray-Sorensen, Char <hr/> Contributor address; City; State; Zip Code Eagleville, PA 19403-5277	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) PA Campus Compact
Date 02/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Christine <hr/> Contributor address; City; State; Zip Code Lummi Island, WA 98262-8681	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/295 Rpt: 104/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenawalt, Eddie <hr/> 6 Contributor address; City; State; Zip Code Griffin, GA 30223-6539	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenlee, Ralph <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624-5910	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Janice <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-5454	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Janice <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-5454	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Janice <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-5454	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/295 Rpt: 105/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Janice <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75044-5454	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Janice <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-5454	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Janice <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-5454	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, Diane <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75028-1946	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, Diane <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75028-1946	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/295 Rpt: 106/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Patricia <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080-1873	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brooke Hull Ins. Agency
Date 04/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffiths, Gracie <hr/> Contributor address; City; State; Zip Code Bloomington, IL 61704-8513	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Customer Experience Manager		Employer (See Instructions) Michaels Stores INC
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griggs, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75234-5201	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office of Wendel Withrow
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griggs, William David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75234-5201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) W. David Griggs Attorney at Law
Date 05/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Groves, Debra <hr/> Contributor address; City; State; Zip Code Austin, TX 78751-4215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/295 Rpt: 107/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Javier <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78744-3714	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CRA		9 Employer (See Instructions) INC Research
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guico, Kevin <hr/> Contributor address; City; State; Zip Code Austin, TX 78756-2054	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Candidate		Employer (See Instructions) Kevin Guico
Date 04/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gullickson, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2853	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gullickson, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2853	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guslander, Nan <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-4907	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/295 Rpt: 108/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guthrie, Dewey <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304-4689	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Auditor		9 Employer (See Instructions) Venator Americas LLC
Date 04/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guthrie, Dewey <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304-4689	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Auditor		Employer (See Instructions) Venator Americas LLC
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guthrie, Dewey <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304-4689	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Auditor		Employer (See Instructions) Venator Americas LLC
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guttadauro, Jeffry <hr/> Contributor address; City; State; Zip Code Spring, TX 77381-4269	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Rackspace
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadnot, Dynetro <hr/> Contributor address; City; State; Zip Code Jasper, TX 75951-7586	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Technology Director		Employer (See Instructions) Jasper ISD

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/295 Rpt: 109/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadnot, Dynetro <hr/> 6 Contributor address; City; State; Zip Code Jasper, TX 75951-7586	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Technology Director		9 Employer (See Instructions) Jasper ISD
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadnot, Dynetro <hr/> Contributor address; City; State; Zip Code Jasper, TX 75951-7586	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Technology Director		Employer (See Instructions) Jasper ISD
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadnot, Dynetro <hr/> Contributor address; City; State; Zip Code Jasper, TX 75951-7586	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Technology Director		Employer (See Instructions) Jasper ISD
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadnot, Dynetro <hr/> Contributor address; City; State; Zip Code Jasper, TX 75951-7586	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Technology Director		Employer (See Instructions) Jasper ISD
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadnot, Dynetro <hr/> Contributor address; City; State; Zip Code Jasper, TX 75951-7586	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Technology Director		Employer (See Instructions) Jasper ISD

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/295 Rpt: 110/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagan, Mallory <hr/> 6 Contributor address; City; State; Zip Code Madison, AL 35758	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Communications Director		9 Employer (See Instructions) Miss America Organization
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagan, Mallory <hr/> Contributor address; City; State; Zip Code Madison, AL 35758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Communications Director		Employer (See Instructions) Miss America Organization
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagan, Mallory <hr/> Contributor address; City; State; Zip Code Madison, AL 35758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Communications Director		Employer (See Instructions) Miss America Organization
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagan, Mallory <hr/> Contributor address; City; State; Zip Code Madison, AL 35758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Communications Director		Employer (See Instructions) Miss America Organization
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagan, Mallory <hr/> Contributor address; City; State; Zip Code Madison, AL 35758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Communications Director		Employer (See Instructions) Miss America Organization

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/295 Rpt: 111/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagan, Mallory <hr/> 6 Contributor address; City; State; Zip Code Madison, AL 35758	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Communications Director		9 Employer (See Instructions) Miss America Organization
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halley, David <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424-3401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halum, Faisal <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-4336	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Briggs Freeman Sotheby?s
Date 01/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hames, Karen <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092-4846	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hames, Karen <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092-4846	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/295 Rpt: 112/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hames, Karen <hr/> 6 Contributor address; City; State; Zip Code The Colony, TX 75056-4482	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hames, Karen <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092-4846	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hames, Karen <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092-4846	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hames, Karen <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092-4846	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hames, Karen <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056-4482	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/295 Rpt: 113/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hames, Karen	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Southlake, TX 76092-4846		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Cynthia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Spokane, WA 99223-8217		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Coldwell Banker
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Cynthia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Spokane, WA 99223-8217		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Coldwell Banker
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Cynthia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Spokane, WA 99223-8217		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Coldwell Banker
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Cynthia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Spokane, WA 99223-8217		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Coldwell Banker

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/295 Rpt: 114/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Cynthia	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Spokane, WA 99223-8217		
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Coldwell Banker
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hampson, Robert	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Richardson, TX 75080-4922		
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Brian	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Garland, TX 75041-4951		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Richardson ISD
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Isabella	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Charlottesville, VA 22903-4031		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) TCU
Date 06/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Regina	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Richardson, TX 75080-5604		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/295 Rpt: 115/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Sharon T <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77384-2228	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Sharon T <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384-2228	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartge, Paulette <hr/> Contributor address; City; State; Zip Code Mansfield, OH 44907-1649	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hassan, Joseph <hr/> Contributor address; City; State; Zip Code Reading, PA 19606-9593	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hassan, Joseph <hr/> Contributor address; City; State; Zip Code Reading, PA 19606-9593	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/295 Rpt: 116/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hastings, Steven <hr/> 6 Contributor address; City; State; Zip Code Southlake, TX 76092-6220	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) ValueScope Inc
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Havran, Jay <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-8517	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Treasurer		Employer (See Instructions) Stonewall Democrats of Dallas
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayden, Marilee <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035-1199	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heald, Freda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-6221	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Temple Emanu-el
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Lauren <hr/> Contributor address; City; State; Zip Code League City, TX 77573-2257	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Systems Engineer		Employer (See Instructions) NASA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/295 Rpt: 117/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedley, Lily Claire <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10003-6207	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Producer		9 Employer (See Instructions) Dorothy St Pictures
Date 02/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heeb, William <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45215-1160	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heimer, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-2340	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hein, Debby <hr/> Contributor address; City; State; Zip Code Bedford, TX 76021-4924	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heinze, Scott <hr/> Contributor address; City; State; Zip Code Mount Vernon, NY 10552-1829	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Paramedic Lieutenant		Employer (See Instructions) FDNY

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/295 Rpt: 118/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helfand, Marcy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75240-5510	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Marcy C. Helfand P.C.
Date 06/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hellyer, Constance <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-4902	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hemmeter, Tracy <hr/> Contributor address; City; State; Zip Code San Jose, CA 95119-1749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hemyari, Keyavash <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-7308	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Self-employed		Employer (See Instructions) Keyavash Hemyari
Date 04/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, John <hr/> Contributor address; City; State; Zip Code Plano, TX 75074-2712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/295 Rpt: 119/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Donald <hr/> 6 Contributor address; City; State; Zip Code Charlottesville, VA 22903-4584	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Recording Artist		9 Employer (See Instructions) Self employed
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensel, Nancy <hr/> Contributor address; City; State; Zip Code Laguna Woods, CA 92637-3455	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) New American colleges
Date 02/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensel, Nancy <hr/> Contributor address; City; State; Zip Code Laguna Woods, CA 92637-3455	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) New American colleges
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensel, Nancy <hr/> Contributor address; City; State; Zip Code Laguna Woods, CA 92637-3455	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) New American colleges
Date 04/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensel, Nancy <hr/> Contributor address; City; State; Zip Code Laguna Woods, CA 92637-3455	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) New American colleges

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/295 Rpt: 120/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensel, Nancy <hr/> 6 Contributor address; City; State; Zip Code Laguna Woods, CA 92637-3455	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) New American colleges
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensel, Nancy <hr/> Contributor address; City; State; Zip Code Laguna Woods, CA 92637-3455	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) New American colleges
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Jose <hr/> Contributor address; City; State; Zip Code Manchaca, TX 78652-5637	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Dispute Management Group LLC
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hevel, Claudia <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94024-5527	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hewitt, Jeffrey <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11249-4127	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Self employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/295 Rpt: 121/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiatt, Laura <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77024-6235	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Leadership coach		9 Employer (See Instructions) EDP
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Dana <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2014	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Selwyn <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-4220	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillegas, Bob <hr/> Contributor address; City; State; Zip Code Houston, TX 77080-3815	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillegas, Bob <hr/> Contributor address; City; State; Zip Code Houston, TX 77080-3815	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/295 Rpt: 122/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillegas, Bob <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77080-3815	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillegas, Bob <hr/> Contributor address; City; State; Zip Code Houston, TX 77080-3815	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillegas, Bob <hr/> Contributor address; City; State; Zip Code Houston, TX 77080-3815	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillegas, Bob <hr/> Contributor address; City; State; Zip Code Houston, TX 77080-3815	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiller, Jay <hr/> Contributor address; City; State; Zip Code Austin, TX 78726-1375	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Yoga Instructor		Employer (See Instructions) LASR

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinayon, Liezyl <hr/> 6 Contributor address; City; State; Zip Code Corinth, TX 76210-1598	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Yu Law Firm
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hines, Vick <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-4375	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hines, Vick <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-4375	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hines, Vick <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-4375	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hines, Vick <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-4375	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/295 Rpt: 124/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hines, Vick <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757-4375	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hines, Vick <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-4375	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinson, Winifred <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-5807	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Caregiver		Employer (See Instructions) Visiting Angels
Date 03/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogan, Nancy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollister, Dianne <hr/> Contributor address; City; State; Zip Code Grapeland, TX 75844-0811	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/295 Rpt: 125/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holloway, Peggy <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080-4400	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holt, Debby <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051-4047	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holzer, Jean <hr/> Contributor address; City; State; Zip Code Galveston, TX 77551-1745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Systems & Data Analyst		Employer (See Instructions) The Boeing Company
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Terry <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-5641	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horwitz, Sandy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-3336	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) Minute Clinic

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/295 Rpt: 126/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hough, Mary	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Austin, TX 78757-6990		
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Michaels
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Ashlee	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code El Prado, NM 87529-0244		
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Ashlee Howard
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Debra	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Chico, CA 95926-7709		
Principal occupation / Job title (See Instructions) IT Analyst		Employer (See Instructions) Tri Counties Bank
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howery, Nivaaha	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Garland, TX 75044-4544		
Principal occupation / Job title (See Instructions) Graphic designer		Employer (See Instructions) DCCCD
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howland, Marianne	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Dallas, TX 75248-4307		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Duffee + Eitzen

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/295 Rpt: 127/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howland, Marianne	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code Dallas, TX 75248-4307		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Duffee + Eitzen
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howland, Marianne	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Dallas, TX 75248-4307		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Duffee + Eitzen
Date 04/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howland, Marianne	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Dallas, TX 75248-4307		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Duffee + Eitzen
Date 05/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howland, Marianne	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Dallas, TX 75248-4307		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Duffee + Eitzen
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howland, Marianne	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Dallas, TX 75248-4307		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Duffee + Eitzen

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/295 Rpt: 128/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hua, Cindy <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75040-3484	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PhD Candidate		9 Employer (See Instructions) SMU
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hua, Cindy <hr/> Contributor address; City; State; Zip Code Garland, TX 75040-3484	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PhD Candidate		Employer (See Instructions) SMU
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hua, Cindy <hr/> Contributor address; City; State; Zip Code Garland, TX 75040-3484	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PhD Candidate		Employer (See Instructions) SMU
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huang, Irene <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75032-6830	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Demand Planner		Employer (See Instructions) KidKraft
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huang, Irene <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75032-6830	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Demand Planner		Employer (See Instructions) KidKraft

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/295 Rpt: 129/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hull, Brooke <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080-1873	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Insurance		9 Employer (See Instructions) Self employed
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Carl <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2015	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunziker, J Emil <hr/> Contributor address; City; State; Zip Code Austin, TX 78751-1325	Amount of Contribution (\$) \$20.83
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchison Cucco, Katherine <hr/> Contributor address; City; State; Zip Code Seabrook, TX 77586-1825	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutter, Lou <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-7624	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Lou Hutter Consulting

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/295 Rpt: 130/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutter, Lou <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75219-7624	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Lou Hutter Consulting
Date 03/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutter, Lou <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-7624	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Lou Hutter Consulting
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutter, Lou <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-7624	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Lou Hutter Consulting
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutter, Lou <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-7624	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Lou Hutter Consulting
Date 03/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Iba, Bret <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137-4323	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/295 Rpt: 131/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Illich, Niles	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Dallas, TX 75244-7028		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Scott H. Palmer P.C.
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Immanivong, Uno	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75205-1809		
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Red Stix
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inake, Sharon M	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pearl City, HI 96782-1647		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ine, Linda	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Port Washington, WI 53074-1182		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/06/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00027342) International Brotherhood of Electrical Workers PAC	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Washington, DC 20001-3886		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/295 Rpt: 132/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irshad, Sualeha <hr/> 6 Contributor address; City; State; Zip Code Mansfield, TX 76063-1984	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Food and Beverage		9 Employer (See Instructions) Six Flags
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaafar, Heidi <hr/> Contributor address; City; State; Zip Code Potomac, MD 20854-2750	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Colorectal Cancer Alliance
Date 05/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jablonski, Carol <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1317	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Carol <hr/> Contributor address; City; State; Zip Code Charleston, SC 29412-3449	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Jeffery <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-4428	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Venture Capital		Employer (See Instructions) Thayer Ventures

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/295 Rpt: 133/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, John	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Dallas, TX 75244-7311		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Fishman Jackson
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janes, Robert	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Austin, TX 78722-1633		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jay, Amanda	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Cedar Hill, TX 75106-1059		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johannesen, Allan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Rochdale, MA 01542-1144		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johannesen, Allan	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Rochdale, MA 01542-1144		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johannesen, Allan <hr/> 6 Contributor address; City; State; Zip Code Rochdale, MA 01542-1144	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Eric <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-5513	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Dallas ISD
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Eric <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-5513	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Dallas ISD
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lucy <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-2870	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Real estate investor		Employer (See Instructions) Self employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Wallace & Betty <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459-5171	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/295 Rpt: 135/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Adah <hr/> 6 Contributor address; City; State; Zip Code Wimberley, TX 78676-9405	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) college professor		9 Employer (See Instructions) Texas State University
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Adah <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676-9405	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) college professor		Employer (See Instructions) Texas State University
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Adah <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676-9405	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) college professor		Employer (See Instructions) Texas State University
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Adah <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676-9405	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) college professor		Employer (See Instructions) Texas State University
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Adah <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676-9405	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) college professor		Employer (See Instructions) Texas State University

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 132/295 Rpt: 136/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Adah <hr/> 6 Contributor address; City; State; Zip Code Wimberley, TX 78676-9405	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) college professor		9 Employer (See Instructions) Texas State University
Date 04/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Kenneth <hr/> Contributor address; City; State; Zip Code Lavon, TX 75166-1986	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Regional Sales		Employer (See Instructions) INSCO
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Michael <hr/> Contributor address; City; State; Zip Code Nashua, NH 03060-2733	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joshi, Vishwanath <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-2320	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Texas instruments
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juett, Gwynne <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624-3620	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kamp, Pete <hr/> 6 Contributor address; City; State; Zip Code Denton, TX 76209-1317	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Premier Sales Group Inc
Date 01/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaner, Joseph <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1600	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Actuary		Employer (See Instructions) Globe Life
Date 03/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaner, Joseph <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1600	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Actuary		Employer (See Instructions) Globe Life
Date 04/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaner, Joseph <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1600	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Actuary		Employer (See Instructions) Globe Life
Date 05/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaner, Joseph <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1600	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Actuary		Employer (See Instructions) Globe Life

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaner, Joseph <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248-1600	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Actuary		9 Employer (See Instructions) Globe Life
Date 02/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karol, Jennifer <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-6648	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kassal, Sonja <hr/> Contributor address; City; State; Zip Code Midland, TX 79705-4441	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) West Texas Symphony
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Michael <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204-7482	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jackson walker
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Michael <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204-7482	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jackson walker

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Morgan <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77006-5312	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PSC		9 Employer (See Instructions) MD Anderson Cancer Center
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keiser, Joan <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201-5753	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Mgmt & Prog Analyst		Employer (See Instructions) Federal Govt
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelso, Rhiannon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75251-2231	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self - Kelso Law PLLC
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerins, Mark <hr/> Contributor address; City; State; Zip Code Dallas, TX 75252-6505	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Southern Methodist University		Employer (See Instructions) Professor
Date 05/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keton, James <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75070-6480	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keton, James	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Mckinney, TX 75070-6480		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keysor, Georgia	Amount of Contribution (\$) \$8.33
Contributor address; City; State; Zip Code Austin, TX 78757-3221		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiernan, Kimberly	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Rockwall, TX 75087-6118		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self employed
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiernan, Kimberly	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Rockwall, TX 75087-6118		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self employed
Date 03/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiernan, Kimberly	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Rockwall, TX 75087-6118		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiernan, Kimberly	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Rockwall, TX 75087-6118		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Self employed
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiernan, Kimberly	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Rockwall, TX 75087-6118		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self employed
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiernan, Kimberly	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Rockwall, TX 75087-6118		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self employed
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim, Kyong	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75202-5224		
Principal occupation / Job title (See Instructions) Hair stylist		Employer (See Instructions) Salon 5014
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kindem, Andrew	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Richardson, TX 75082-4539		
Principal occupation / Job title (See Instructions) Audit Specialist		Employer (See Instructions) Health Care Service Corporation

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Maura <hr/> 6 Contributor address; City; State; Zip Code Las Vegas, NV 89128-2154	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleinman, Betsy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-3130	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klion, Amy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-1626	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koym-Garza, Mario <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-4328	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) Precocity LLC
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kramer, Valerie <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-1435	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Valerie Kramer

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kramer, Valerie <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757-1435	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Contractor		9 Employer (See Instructions) Valerie Kramer
Date 03/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kramer, Valerie <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-1435	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Valerie Kramer
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kramer, Valerie <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-1435	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Valerie Kramer
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kraus, Peter <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-2024	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) WatersKrausPaulSiegel
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krause, Holly <hr/> Contributor address; City; State; Zip Code Humble, TX 77346-1948	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) ResponsiveEd

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubiak, Sherrie <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248-1427	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kucera, Brad <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75010-4221	Amount of Contribution (\$) \$50.27
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kull, Veda <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75088-5104	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kull, Veda <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75088-5104	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kull, Veda <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75088-5104	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 141/295 Rpt: 145/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kull, Veda <hr/> 6 Contributor address; City; State; Zip Code Rowlett, TX 75088-5104	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kull, Veda <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75088-5104	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kull, Veda <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75088-5104	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kutac, Gary <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218-3553	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaNoue, Michele <hr/> Contributor address; City; State; Zip Code Houston, TX 77041-6937	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Headworks International Inc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 142/295 Rpt: 146/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaNoue, Michele <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77041-6937	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Headworks International Inc.
Date 04/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaNoue, Michele <hr/> Contributor address; City; State; Zip Code Houston, TX 77041-6937	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Headworks International Inc.
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacher, Kerri <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-3118	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Interior Designer		Employer (See Instructions) Self employed
Date 04/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lahpor, Kaci <hr/> Contributor address; City; State; Zip Code Plano, TX 75075-7307	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamont, Adam <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243-3227	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Dallas Independent School District

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langford, Ivan	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code La Marque, TX 77568-6548		
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self-employed
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langford, Ivan	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code La Marque, TX 77568-6548		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-employed
Date 02/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanterman, John	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Kailua Kona, HI 96740-7901		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Kaiser Permanente
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larsen, Caleb	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Garland, TX 75044-2034		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) MeridianLink
Date 05/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Chelsea	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Garland, TX 75044-2062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/295 Rpt: 148/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Richardson, TX 75080-1514		
8 Principal occupation / Job title (See Instructions) Real Estate Broker		9 Employer (See Instructions) Self
Date 01/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Richardson, TX 75080-1514		
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Richardson, TX 75080-1514		
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 03/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Richardson, TX 75080-1514		
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 04/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Richardson, TX 75080-1514		
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/295 Rpt: 149/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080-1514	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Real Estate Broker		9 Employer (See Instructions) Self
Date 06/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-1514	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-1514	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Linda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75228-3308	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, John <hr/> Contributor address; City; State; Zip Code Penn Valley, PA 19072-1332	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LeBleu, Jeanine <hr/> 6 Contributor address; City; State; Zip Code Brookshire, TX 77423-3401	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Registered		9 Employer (See Instructions) Nurse
Date 01/03/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00843110</u>) Leaders We Deserve PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20003-4303	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leal, Chris <hr/> Contributor address; City; State; Zip Code Dallas, TX 75202-1270	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Dallas ISD
Date 01/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leeman, Gregg <hr/> Contributor address; City; State; Zip Code Lawrenceville, GA 30044-5247	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lefforge, Nan <hr/> Contributor address; City; State; Zip Code Houston, TX 77079-7331	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 147/295 Rpt: 151/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lefforge, Nan <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77079-7331	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Psychotherapist		9 Employer (See Instructions) Self employed
Date 03/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lefforge, Nan <hr/> Contributor address; City; State; Zip Code Houston, TX 77079-7331	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self employed
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lefforge, Nan <hr/> Contributor address; City; State; Zip Code Houston, TX 77079-7331	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self employed
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lefforge, Nan <hr/> Contributor address; City; State; Zip Code Houston, TX 77079-7331	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self employed
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lefforge, Nan <hr/> Contributor address; City; State; Zip Code Houston, TX 77079-7331	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/295 Rpt: 152/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Legut, Jessica <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77429-6570	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemmond, byron <hr/> Contributor address; City; State; Zip Code Katy, TX 77449-7504	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemmond, byron <hr/> Contributor address; City; State; Zip Code Katy, TX 77449-7504	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lervisit, Woot <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243-4001	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) RTI
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levi, Michael <hr/> Contributor address; City; State; Zip Code Arlington, MA 02476-8107	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 149/295 Rpt: 153/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levi, Michael <hr/> 6 Contributor address; City; State; Zip Code Arlington, MA 02476-8107	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levi, Michael <hr/> Contributor address; City; State; Zip Code Arlington, MA 02476-8107	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levi, Michael <hr/> Contributor address; City; State; Zip Code Arlington, MA 02476-8107	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levi, Michael <hr/> Contributor address; City; State; Zip Code Arlington, MA 02476-8107	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levi, Michael <hr/> Contributor address; City; State; Zip Code Arlington, MA 02476-8107	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 150/295 Rpt: 154/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Wesley <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78748-2640	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Lewis Commercial Realty Inc.
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Wesley <hr/> Contributor address; City; State; Zip Code Austin, TX 78748-2640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Lewis Commercial Realty Inc.
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Li, Victoria <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-3633	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lilly Tallman, Vicki <hr/> Contributor address; City; State; Zip Code League City, TX 77573-5788	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lim, Marjorie <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75054-6852	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linden, Greg	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Oakland, CA 94602-3556		
8 Principal occupation / Job title (See Instructions) Researcher		9 Employer (See Instructions) UC Berkeley
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linden, Melissa	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78705-2813		
Principal occupation / Job title (See Instructions) Director of Development		Employer (See Instructions) Texas State University
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindlar, Merle	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Scottsdale, AZ 85257-1744		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00286500</u>) Lloyd Doggett for Congress	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Austin, TX 78702-2029		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, James	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code San Francisco, CA 94114-3319		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) RedSeal Networks

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, James <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94114-3319	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) RedSeal Networks
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, James <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94114-3319	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) RedSeal Networks
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, James <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94114-3319	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) RedSeal Networks
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, James <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94114-3319	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) RedSeal Networks
Date 06/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, James <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94114-3319	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) RedSeal Networks

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockridge, Raene <hr/> 6 Contributor address; City; State; Zip Code Everman, TX 76140-3619	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loehman, Jon <hr/> Contributor address; City; State; Zip Code West Lake Hills, TX 78746-3550	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Govt Affairs		Employer (See Instructions) AT&T
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loper, Kathryn <hr/> Contributor address; City; State; Zip Code Chicago, IL 60610-3161	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Campus Recruiting Program Manager		Employer (See Instructions) Credera
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorenz, Sheridan <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-1036	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Mitchell Family Corp
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, John <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75901-1215	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Mike Love & Associates LLC

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 154/295 Rpt: 158/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowder, Jordan	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Plano, TX 75024-3742		
8 Principal occupation / Job title (See Instructions) Risk Consultant		9 Employer (See Instructions) Avantax Wealth Management
Date 06/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowry, Jeffrey	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Richardson, TX 75080-2359		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Citra Urgent Care
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loyd, Leslie	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Dallas, TX 75248-4210		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucero, Annabelle	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Highlands Ranch, CO 80130-4416		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lujan, David	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Rowlett, TX 75089-1369		
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) GEICO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 155/295 Rpt: 159/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lujan, David	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Rowlett, TX 75089-1369		
8 Principal occupation / Job title (See Instructions) Trainer		9 Employer (See Instructions) GEICO
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lujan, David	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Rowlett, TX 75089-1369		
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) GEICO
Date 04/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lujan, David	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Rowlett, TX 75089-1369		
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) GEICO
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lujan, David	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Rowlett, TX 75089-1369		
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) GEICO
Date 04/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lujan, David	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Rowlett, TX 75089-1369		
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) GEICO

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 156/295 Rpt: 160/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lujan, David	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Rowlett, TX 75089-1369		
8 Principal occupation / Job title (See Instructions) Trainer		9 Employer (See Instructions) GEICO
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunceford, Gene	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75220-2058		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunt, Lucy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77030-1117		
Principal occupation / Job title (See Instructions) Tax accountant		Employer (See Instructions) Not Employed
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunt, Lucy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77030-1117		
Principal occupation / Job title (See Instructions) Tax accountant		Employer (See Instructions) Not Employed
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunt, Lucy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77030-1117		
Principal occupation / Job title (See Instructions) Tax accountant		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 157/295 Rpt: 161/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunt, Lucy <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77030-1117	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Tax accountant		9 Employer (See Instructions) Not Employed
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunt, Lucy <hr/> Contributor address; City; State; Zip Code Houston, TX 77030-1117	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Tax accountant		Employer (See Instructions) Not Employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunt, Lucy <hr/> Contributor address; City; State; Zip Code Houston, TX 77030-1117	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Tax accountant		Employer (See Instructions) Not Employed
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luo, Leya <hr/> Contributor address; City; State; Zip Code University Park, MD 20782-1113	Amount of Contribution (\$) \$34.00
Principal occupation / Job title (See Instructions) Research Assistant		Employer (See Instructions) UMD
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch, Jill <hr/> Contributor address; City; State; Zip Code Austin, TX 78745-1033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacDowell, Kelly	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Garland, TX 75044-2805		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maggio, Marissa	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Plano, TX 75075-6413		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Firm of Aaron Herbert
Date 01/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahmud, Parisa	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Austin, TX 78732-1240		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahmud, Parisa	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Austin, TX 78732-1240		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 03/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahmud, Parisa	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Austin, TX 78732-1240		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 159/295 Rpt: 163/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahmud, Parisa	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Austin, TX 78732-1240		
8 Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) Student
Date 05/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahmud, Parisa	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Austin, TX 78732-1240		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 06/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahmud, Parisa	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Austin, TX 78732-1240		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 03/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Makare, Trenton	Amount of Contribution (\$) \$125.00
Contributor address; City; State; Zip Code Dallas, TX 75216-1035		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) PCPC
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Rebecca	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code San Antonio, TX 78240-3450		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Alamo Colleges

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mambu, Joseph <hr/> 6 Contributor address; City; State; Zip Code Maple Glen, PA 19002-2878	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mambu, Joseph <hr/> Contributor address; City; State; Zip Code Maple Glen, PA 19002-2878	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manno, Patricia <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2126	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Cfo		Employer (See Instructions) King Archivtectural Metals
Date 05/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manohar, Vimal <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21201-4911	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Meta
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlowe, Thomas <hr/> Contributor address; City; State; Zip Code Rahway, NJ 07065-2600	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Professor Emeritus		Employer (See Instructions) Seton Hall University

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marroquin, Juan J <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20001-5267	7 Amount of Contribution (\$) \$4.04
8 Principal occupation / Job title (See Instructions) Accounting		9 Employer (See Instructions) Federal Govt.
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Daniel <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95831-1840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) California Earthquake Authority
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marston, Mary Katherine <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75089-3612	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Athenahealth
Date 05/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marston, Nancy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-2241	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marston, Walt <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-2241	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Oracle

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Colleen <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248-3132	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Administrative Director		9 Employer (See Instructions) Dallas County Democratic Party
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Colleen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Administrative Director		Employer (See Instructions) Dallas County Democratic Party
Date 03/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Colleen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Administrative Director		Employer (See Instructions) Dallas County Democratic Party
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Colleen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Administrative Director		Employer (See Instructions) Dallas County Democratic Party
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Colleen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Administrative Director		Employer (See Instructions) Dallas County Democratic Party

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 163/295 Rpt: 167/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Colleen	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Dallas, TX 75248-3132		
8 Principal occupation / Job title (See Instructions) Administrative Director		9 Employer (See Instructions) Dallas County Democratic Party
Date 02/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Patricia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Louisville, KY 40222-6477		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Patricia	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Louisville, KY 40222-6477		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Patricia	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Louisville, KY 40222-6477		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Patricia	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Louisville, KY 40222-6477		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 164/295 Rpt: 168/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Patricia <hr/> 6 Contributor address; City; State; Zip Code Louisville, KY 40222-6477	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Oscar <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78414-3418	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 06/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Albert <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208-4470	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) CG Infinity
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathias, Bonnie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75217-3740	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Election Director		Employer (See Instructions) Dallas County Democrats
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matula, Deborah <hr/> Contributor address; City; State; Zip Code Granite Shoals, TX 78654-2563	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Small Business Owner		Employer (See Instructions) Self employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 165/295 Rpt: 169/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matula, Deborah <hr/> 6 Contributor address; City; State; Zip Code Granite Shoals, TX 78654-2563	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Small Business Owner		9 Employer (See Instructions) Self employed
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matula, Deborah <hr/> Contributor address; City; State; Zip Code Granite Shoals, TX 78654-2563	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Small Business Owner		Employer (See Instructions) Self employed
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matula, Deborah <hr/> Contributor address; City; State; Zip Code Granite Shoals, TX 78654-2563	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Small Business Owner		Employer (See Instructions) Self employed
Date 04/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazero, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-4034	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnear, Sharon <hr/> Contributor address; City; State; Zip Code Durango, CO 81301-4408	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired teacher		Employer (See Instructions) None

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCabe, Anne and William <hr/> 6 Contributor address; City; State; Zip Code Delmar, NY 12054-9734	7 Amount of Contribution (\$) \$6.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClelland, Norma <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78213-2627	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self employed
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCollum, Ellen <hr/> Contributor address; City; State; Zip Code Richardson, TX 75082-4611	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCoy, Gregg <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-3524	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Account Management		Employer (See Instructions) RealPage
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonagh, Kathleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78722-1126	Amount of Contribution (\$) \$4.17
Principal occupation / Job title (See Instructions) Early Childhood Music Specialist		Employer (See Instructions) Armstrong Community Music School

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Carrie <hr/> 6 Contributor address; City; State; Zip Code Kansas City, MO 64111-3808	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McEachern, Laurie <hr/> Contributor address; City; State; Zip Code Des Moines, WA 98198	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McEachern, Laurie <hr/> Contributor address; City; State; Zip Code Des Moines, WA 98198	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElmurry, Brandon <hr/> Contributor address; City; State; Zip Code Carbondale, IL 62901-3287	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Account Technician		Employer (See Instructions) Southern Illinois University Carbondale
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElmurry, Brandon <hr/> Contributor address; City; State; Zip Code Carbondale, IL 62901-3287	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Account Technician		Employer (See Instructions) Southern Illinois University Carbondale

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElmurry, Brandon <hr/> 6 Contributor address; City; State; Zip Code Carbondale, IL 62901-3287	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Account Technician		9 Employer (See Instructions) Southern Illinois University Carbondale
Date 04/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElmurry, Brandon <hr/> Contributor address; City; State; Zip Code Carbondale, IL 62901-3287	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Account Technician		Employer (See Instructions) Southern Illinois University Carbondale
Date 05/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElmurry, Brandon <hr/> Contributor address; City; State; Zip Code Carbondale, IL 62901-3287	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Account Technician		Employer (See Instructions) Southern Illinois University Carbondale
Date 06/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McFadden, Elizabeth <hr/> Contributor address; City; State; Zip Code Bridgeport, TX 76426-0163	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired teacher		Employer (See Instructions) Not employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarity, Cathleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-5201	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 169/295 Rpt: 173/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarity, Cathleen	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Austin, TX 78731-5201		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 05/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarity, Cathleen	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78731-5201		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarity, Cathleen	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78731-5201		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarity, Cathleen	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78731-5201		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75248-1505		
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248-1505	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self employed
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1505	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed
Date 04/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1505	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1505	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed
Date 05/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1505	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248-1505	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self employed
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1505	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1505	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGlaufflin, Deborah <hr/> Contributor address; City; State; Zip Code Annapolis, MD 21403-3872	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Nonprofit fundraiser		Employer (See Instructions) Hospice of the Chesapeake
Date 02/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGlaufflin, Deborah <hr/> Contributor address; City; State; Zip Code Annapolis, MD 21403-3872	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Nonprofit fundraiser		Employer (See Instructions) Hospice of the Chesapeake

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SCHEDULE A1

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGlaulin, Deborah <hr/> 6 Contributor address; City; State; Zip Code Annapolis, MD 21403-3872	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Nonprofit fundraiser		9 Employer (See Instructions) Hospice of the Chesapeake
Date 04/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGlaulin, Deborah <hr/> Contributor address; City; State; Zip Code Annapolis, MD 21403-3872	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Nonprofit fundraiser		Employer (See Instructions) Hospice of the Chesapeake
Date 05/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGlaulin, Deborah <hr/> Contributor address; City; State; Zip Code Annapolis, MD 21403-3872	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Nonprofit fundraiser		Employer (See Instructions) Hospice of the Chesapeake
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGlaulin, Deborah <hr/> Contributor address; City; State; Zip Code Annapolis, MD 21403-3872	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Nonprofit fundraiser		Employer (See Instructions) Hospice of the Chesapeake
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuire, Allison <hr/> Contributor address; City; State; Zip Code Ozona, TX 76943-1105	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 173/295 Rpt: 177/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuire, Allison <hr/> 6 Contributor address; City; State; Zip Code Ozona, TX 76943-1105	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuire, William <hr/> Contributor address; City; State; Zip Code Bryan, TX 77803-4699	Amount of Contribution (\$) \$12.29
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuire, William <hr/> Contributor address; City; State; Zip Code Bryan, TX 77803-4699	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McHenry, Marion <hr/> Contributor address; City; State; Zip Code Princeville, HI 96722-5312	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLaughlin, Linda <hr/> Contributor address; City; State; Zip Code Madison, VA 22727-4427	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McPhail, Terry <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027-4133	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meadows, Gabe <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-2322	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meadows, Gabriel <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-2322	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Texas Heavenly Homes Ltd.		Employer (See Instructions) Texas Heavenly Home Builders Ltd.
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendive, Cesare <hr/> Contributor address; City; State; Zip Code Miami, FL 33186-2953	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Miami Dade Schools
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Kay <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78240-4987	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michaelsen, Hedrich	7 Amount of Contribution (\$) \$4.16
6 Contributor address; City; State; Zip Code Austin, TX 78757-1834		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Elizabeth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75219-3463		
Principal occupation / Job title (See Instructions) School Counselor		Employer (See Instructions) Dallas ISD
Date 03/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Flip	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75248-3910		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mirkovic, Nena	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Conroe, TX 77385		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Millennium physicians
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, John	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78756-2203		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, John <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78756-2203	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Michael <hr/> Contributor address; City; State; Zip Code Austin, TX 78727-4551	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Radio Station Manager		Employer (See Instructions) Recording Library of West Texas
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Michael <hr/> Contributor address; City; State; Zip Code Austin, TX 78727-4551	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Radio Station Manager		Employer (See Instructions) Recording Library of West Texas
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Michael <hr/> Contributor address; City; State; Zip Code Austin, TX 78727-4551	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Radio Station Manager		Employer (See Instructions) Recording Library of West Texas
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Michael <hr/> Contributor address; City; State; Zip Code Austin, TX 78727-4551	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Radio Station Manager		Employer (See Instructions) Recording Library of West Texas

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Michael <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78727-4551	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Radio Station Manager		9 Employer (See Instructions) Recording Library of West Texas
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Michael <hr/> Contributor address; City; State; Zip Code Austin, TX 78727-4551	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Radio Station Manager		Employer (See Instructions) Recording Library of West Texas
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, Garrett <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-5350	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Dallas ISD
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, Leesa <hr/> Contributor address; City; State; Zip Code Arlington, TX 76011-2671	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Jan <hr/> Contributor address; City; State; Zip Code Claremont, CA 91711-3419	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Jan <hr/> 6 Contributor address; City; State; Zip Code Claremont, CA 91711-3419	7 Amount of Contribution (\$) \$3.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Jan <hr/> Contributor address; City; State; Zip Code Claremont, CA 91711-3419	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Jan <hr/> Contributor address; City; State; Zip Code Claremont, CA 91711-3419	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Gordon <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-4082	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) NadaMoo
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Melissa <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-5124	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Auditor		Employer (See Instructions) USAA

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrill, Brittany <hr/> 6 Contributor address; City; State; Zip Code Brandon, FL 33511-2251	7 Amount of Contribution (\$) \$2.70
8 Principal occupation / Job title (See Instructions) Retail manager		9 Employer (See Instructions) Petsmart
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrill, Brittany <hr/> Contributor address; City; State; Zip Code Brandon, FL 33511-2251	Amount of Contribution (\$) \$2.70
Principal occupation / Job title (See Instructions) Retail manager		Employer (See Instructions) Petsmart
Date 03/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrill, Brittany <hr/> Contributor address; City; State; Zip Code Brandon, FL 33511-2251	Amount of Contribution (\$) \$2.70
Principal occupation / Job title (See Instructions) Retail manager		Employer (See Instructions) Petsmart
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Dorothy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2809	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Lynn <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2844	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 180/295 Rpt: 184/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Warren <hr/> 6 Contributor address; City; State; Zip Code Cumby, TX 75433-4608	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Page Designer		9 Employer (See Instructions) Herald-Banner Publications
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morriss, Frances <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-4528	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrisey, Christopher <hr/> Contributor address; City; State; Zip Code Stonington, CT 06378-1237	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosaedi, Victoria <hr/> Contributor address; City; State; Zip Code Plano, TX 75075-7506	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mott, Kenneth <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75069-3316	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 181/295 Rpt: 185/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mountain, Gladys <hr/> 6 Contributor address; City; State; Zip Code West Brookfield, MA 01585-2806	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) ERA Realty Services LLC
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mowery, Dennis <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85259-3453	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moyer DeFelice, Rebecca <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-3839	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Emerge TX
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mudrovich, Ellen <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116-8168	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Assistant		Employer (See Instructions) Dr. Steven A. Mudrovich
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Amanda <hr/> Contributor address; City; State; Zip Code Austin, TX 78756-1714	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Winston & Strawn LLP

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 182/295 Rpt: 186/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphree, Cathy <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080-4902	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Cheyenne <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243-3673	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Higher Education Professional		Employer (See Instructions) Southern Methodist University
Date 01/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, Richard <hr/> Contributor address; City; State; Zip Code Fountain Valley, CA 92708-6534	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nadeau, Christine <hr/> Contributor address; City; State; Zip Code Hercules, CA 94547-2716	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nava, Juven <hr/> Contributor address; City; State; Zip Code Wichita, KS 67205-3308	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Communications		Employer (See Instructions) GraceMed Health Clinic

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 183/295 Rpt: 187/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene <hr/> 6 Contributor address; City; State; Zip Code Salinas, CA 93907-9114	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neville, Elaine <hr/> Contributor address; City; State; Zip Code Roseville, CA 95678-1017	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neville, Elaine <hr/> Contributor address; City; State; Zip Code Roseville, CA 95678-1017	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newell, Barbara <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238-2202	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Dallas ISD
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newtown, Sheila <hr/> Contributor address; City; State; Zip Code De Peyster, NY 13633-3405	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 184/295 Rpt: 188/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Bartholomew <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78212-2052	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Dentist		9 Employer (See Instructions) Self employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Bartholomew <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212-2052	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Self employed
Date 01/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Art <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78204-1025	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nigro, Kirsten <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912-4145	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nigro, Kirsten <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912-4145	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 185/295 Rpt: 189/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nigro, Kirsten <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79912-4145	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nigro, Kirsten <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912-4145	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nigro, Kirsten <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912-4145	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nigro, Kirsten <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912-4145	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nixon, Forrest <hr/> Contributor address; City; State; Zip Code San Jose, CA 95112-1731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 186/295 Rpt: 190/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Ellen	7 Amount of Contribution (\$) \$128.25
6 Contributor address; City; State; Zip Code Landenberg, PA 19350-1054		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Ellen S	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Landenberg, PA 19350-1054		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Ellen S	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Landenberg, PA 19350-1054		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Ellen S	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Landenberg, PA 19350-1054		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Ellen S	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Landenberg, PA 19350-1054		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 187/295 Rpt: 191/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Ellen S <hr/> 6 Contributor address; City; State; Zip Code Landenberg, PA 19350-1054	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Ellen S <hr/> Contributor address; City; State; Zip Code Landenberg, PA 19350-1054	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norton, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-3560	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Shackelford Bowen McKinley & Norton LLP
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nowie, Robert <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92260-6059	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) Sr Programmer Analyst		Employer (See Instructions) AT&T Inc.
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nowie, Robert <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92260-6059	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) Sr Programmer Analyst		Employer (See Instructions) AT&T Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 188/295 Rpt: 192/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Brien, Michael <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11229-5914	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OJlle, Judith R <hr/> Contributor address; City; State; Zip Code Wildwood, MO 63011-1920	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLeary, Sandra <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1103	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLeary, Sandra <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1103	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oberhofer, Hanna <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212-3646	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) Web writer		Employer (See Instructions) Red Hat

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 189/295 Rpt: 193/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Odorisio, William	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Turtle Creek, PA 15145-1151		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliver, Julie	Amount of Contribution (\$) \$2.08
Contributor address; City; State; Zip Code Austin, TX 78722-1816		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olsson, Kristin	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75229-4119		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olsson, Leslie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Denton, TX 76207-2336		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omae, Roger	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75204-8630		
Principal occupation / Job title (See Instructions) Treasury Manager		Employer (See Instructions) Toyota

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 190/295 Rpt: 194/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omae, Roger <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75204-8630	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Treasury Manager		9 Employer (See Instructions) Toyota
Date 04/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omae, Roger <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204-8630	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Treasury Manager		Employer (See Instructions) Toyota
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omae, Roger <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204-8630	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Treasury Manager		Employer (See Instructions) Toyota
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omae, Roger <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204-8630	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Treasury Manager		Employer (See Instructions) Toyota
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Carol <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-2147	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) publishing		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 191/295 Rpt: 195/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Carol <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230-2147	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) publishing		9 Employer (See Instructions) Self employed
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Janie <hr/> Contributor address; City; State; Zip Code Austin, TX 78705-1820	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Janie <hr/> Contributor address; City; State; Zip Code Austin, TX 78705-1820	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Janie <hr/> Contributor address; City; State; Zip Code Austin, TX 78705-1820	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Janie <hr/> Contributor address; City; State; Zip Code Austin, TX 78705-1820	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 192/295 Rpt: 196/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Janie	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Austin, TX 78705-1820		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Janie	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Austin, TX 78705-1820		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orrick, Landa	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Fort Worth, TX 76109-2218		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orth, Kim	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75206-5649		
Principal occupation / Job title (See Instructions) Sales Support		Employer (See Instructions) Cronan
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Othrow, Marge	Amount of Contribution (\$) \$17.50
Contributor address; City; State; Zip Code Brooklyn, NY 11238-1804		
Principal occupation / Job title (See Instructions) Assistant Office Manager		Employer (See Instructions) Training Institute for Mental Health

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 193/295 Rpt: 197/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Overton, David <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78723-5445	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Partner		9 Employer (See Instructions) Opus Faveo Innovation Development
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Jennifer <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-1602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Higier Allen & Lautin PC
Date 02/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Irma <hr/> Contributor address; City; State; Zip Code Horizon City, TX 79928-6442	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ozarow, Meaders <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-3311	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Empire Baking Co
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padian, Ace <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-3747	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 194/295 Rpt: 198/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pancorvo, Carmen	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code Midlothian, TX 76065-5464		
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) BP Solar Services
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pancorvo, Carmen	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Midlothian, TX 76065-5464		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) BP Solar Services
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parks, Todd	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Las Vegas, NV 89143-1195		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) University of California
Date 06/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patchen, Justin	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77007-3603		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patton, Nancy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Florence, TX 76527-4775		
Principal occupation / Job title (See Instructions) Kennel Owner/Manager		Employer (See Instructions) Self employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 195/295 Rpt: 199/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patzke, J.R.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Farmers Branch, TX 75234-3629	
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Evergreen Healthcare
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patzke, J.R.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Farmers Branch, TX 75234-3629	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Evergreen Healthcare
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Pamela	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code San Marino, CA 91108-2840	
Principal occupation / Job title (See Instructions) Nursing Instructor		Employer (See Instructions) Cal-State Los Angeles
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Sharon	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code El Paso, TX 79936-3726	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Sharon	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code El Paso, TX 79936-3726	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 196/295 Rpt: 200/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Sharon <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79936-3726	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Sharon <hr/> Contributor address; City; State; Zip Code El Paso, TX 79936-3726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Sharon <hr/> Contributor address; City; State; Zip Code El Paso, TX 79936-3726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Sharon <hr/> Contributor address; City; State; Zip Code El Paso, TX 79936-3726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perreault, Michala <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016-5207	Amount of Contribution (\$) \$10.19
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) FWISD

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 197/295 Rpt: 201/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perrenod, William	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code New Orleans, LA 70117-5727		
8 Principal occupation / Job title (See Instructions) Nonprofit Business Consultant		9 Employer (See Instructions) Self Employed
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perrenod, William	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New Orleans, LA 70117-5727		
Principal occupation / Job title (See Instructions) Nonprofit Business Consultant		Employer (See Instructions) Self Employed
Date 03/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perrenod, William	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New Orleans, LA 70117-5727		
Principal occupation / Job title (See Instructions) Nonprofit Business Consultant		Employer (See Instructions) Self Employed
Date 04/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perrenod, William	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New Orleans, LA 70117-5727		
Principal occupation / Job title (See Instructions) Nonprofit Business Consultant		Employer (See Instructions) Self Employed
Date 05/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perrenod, William	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New Orleans, LA 70117-5727		
Principal occupation / Job title (See Instructions) Nonprofit Business Consultant		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 198/295 Rpt: 202/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perrenod, William <hr/> 6 Contributor address; City; State; Zip Code New Orleans, LA 70117-5727	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Nonprofit Business Consultant		9 Employer (See Instructions) Self Employed
Date 04/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Sylvia <hr/> Contributor address; City; State; Zip Code Austin, TX 78752-4509	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petrilli, Elizabeth <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91105-2448	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) None
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phariss, Mark <hr/> Contributor address; City; State; Zip Code Plano, TX 75093-7991	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Tenet Healthcare
Date 05/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piellucci, Doreen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1101	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 199/295 Rpt: 203/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pier, Don <hr/> 6 Contributor address; City; State; Zip Code Scottsdale, AZ 85251-1574	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Gretchen <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-4721	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729-7728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729-7728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729-7728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 200/295 Rpt: 204/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Austin, TX 78729-7728		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78729-7728		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78729-7728		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinzon, Yvette	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Miami, FL 33186-3909		
Principal occupation / Job title (See Instructions) Compliance officer		Employer (See Instructions) Credicorp Securities
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinzon, Yvette	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Miami, FL 33186-3909		
Principal occupation / Job title (See Instructions) Compliance officer		Employer (See Instructions) Credicorp Securities

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 201/295 Rpt: 205/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pizer, Josie	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Great Neck, NY 11021-2138		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plassmann, Charles	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Driftwood, TX 78619-5770		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plassmann, Charles	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Driftwood, TX 78619-5770		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plassmann, Charles	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Driftwood, TX 78619-5770		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plumer, Carl	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code New York, NY 10024		
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 202/295 Rpt: 206/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plumer, Carl	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code New York, NY 10024		
8 Principal occupation / Job title (See Instructions) Writer		9 Employer (See Instructions) Self employed
Date 03/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plumer, Carl	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code New York, NY 10024		
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self employed
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plumer, Carl	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code New York, NY 10024		
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self employed
Date 05/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plumer, Carl	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code New York, NY 10024		
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plunkett, Richard	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Redmond, WA 98053-5714		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 203/295 Rpt: 207/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poensch, Theresa <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78212-5219	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pomykal, Keith <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-8526	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Commercial Real Estate		Employer (See Instructions) Pomykal LLC
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pongsanarakul, Nitita <hr/> Contributor address; City; State; Zip Code Austin, TX 78732-2232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Salesforce Administrator		Employer (See Instructions) NAF
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pope, Lindsey <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22301-2137	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Communications		Employer (See Instructions) TAS
Date 03/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Loretta <hr/> Contributor address; City; State; Zip Code Richardson, TX 75082-3762	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 204/295 Rpt: 208/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potter, Diane	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Fbg, TX 78624-6137		
8 Principal occupation / Job title (See Instructions) Cashier		9 Employer (See Instructions) Habitat for Humanity
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poulsen, Greta	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Richardson, TX 75082-4501		
Principal occupation / Job title (See Instructions) Instructional Technologist		Employer (See Instructions) Self employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poulsen, Greta	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Richardson, TX 75082-4501		
Principal occupation / Job title (See Instructions) Instructional Technologist		Employer (See Instructions) Self employed
Date 01/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Greig	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Leon, TX 77539-2327		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Greig	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Leon, TX 77539-2327		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 205/295 Rpt: 209/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Greig	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code San Leon, TX 77539-2327		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 04/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Greig	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Leon, TX 77539-2327		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Greig	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Leon, TX 77539-2327		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Greig	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code San Leon, TX 77539-2327		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Michael	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75248-5642		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 206/295 Rpt: 210/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Jan	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Kennedale, TX 76060-6473		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poyser, Linda	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78704-2716		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proia, Marie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Corpus Christi, TX 78418-5354		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proia, Marie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Corpus Christi, TX 78418-5354		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proia, Marie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Corpus Christi, TX 78418-5354		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 207/295 Rpt: 211/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proia, Marie	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Corpus Christi, TX 78418-5354		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proia, Marie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Corpus Christi, TX 78418-5354		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proia, Marie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Corpus Christi, TX 78418-5354		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruitt, Pamela D	Amount of Contribution (\$) \$4.16
Contributor address; City; State; Zip Code Austin, TX 78751-3316		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self employed
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purdy, Byron	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Richardson, TX 75081-3118		
Principal occupation / Job title (See Instructions) Product Management		Employer (See Instructions) JP Morgan Chase

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 208/295 Rpt: 212/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Putnam, Andre	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Cobleskill, NY 12043-5902		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quillin, Patty	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Santa Cruz, CA 95060-5875		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quintana, Ashley	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Benbrook, TX 76116-7616		
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Fort Worth ISD
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinteros, Graciela	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Lubbock, TX 79416-5622		
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Noble Care Solutions
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinteros, Graciela	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Lubbock, TX 79416-5622		
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Noble Care Solutions

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 209/295 Rpt: 213/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinteros, Graciela <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79416-5622	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Social worker		9 Employer (See Instructions) Noble Care Solutions
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rabel, Andrea <hr/> Contributor address; City; State; Zip Code Lawrenceville, NJ 08648-1474	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radcliffe, Andrew <hr/> Contributor address; City; State; Zip Code Maricopa, AZ 85139-8844	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radding, Nancy <hr/> Contributor address; City; State; Zip Code Austin, TX 78748-1868	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramos, Bryan <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30324-2750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ramos & Law

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ran, Rochelle <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75044-5934	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Special Education Teacher		9 Employer (See Instructions) Garland Independent School District
Date 05/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ran, Rochelle <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-5934	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Special Education Teacher		Employer (See Instructions) Garland Independent School District
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rasmussen, Thomas <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116-3571	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawn, Maura <hr/> Contributor address; City; State; Zip Code Lancaster, OH 43130-9739	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Wellcoaches Corporation
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray, Ryan <hr/> Contributor address; City; State; Zip Code Crowley, TX 76036-4713	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ray Law Group

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2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rea, Michelle <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757-8343	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Associate client director		9 Employer (See Instructions) Nielsen consumer LLC
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Realini, Janet <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78255-3447	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Founder and PI Big Decisions Study		Employer (See Instructions) Healthy Futures of Texas
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reaves, Diane <hr/> Contributor address; City; State; Zip Code Sequim, WA 98382-4755	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 01/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Arianna <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75181-1793	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Nanny		Employer (See Instructions) Care.com
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reid, Jenna <hr/> Contributor address; City; State; Zip Code Keller, TX 76248-5731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 212/295 Rpt: 216/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renshaw, Seth	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code Dallas, TX 75206-1464		
8 Principal occupation / Job title (See Instructions) Programmer		9 Employer (See Instructions) Gearbox Software
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renshaw, Seth	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Dallas, TX 75206-1464		
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Gearbox Software
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renshaw, Seth	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Dallas, TX 75206-1464		
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Gearbox Software
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renshaw, Seth	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Dallas, TX 75206-1464		
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Gearbox Software
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renshaw, Seth	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Dallas, TX 75206-1464		
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Gearbox Software

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 213/295 Rpt: 217/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renshaw, Seth	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code Dallas, TX 75206-1464		
8 Principal occupation / Job title (See Instructions) Programmer		9 Employer (See Instructions) Gearbox Software
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Ladd	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77062-4731		
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self employed
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Ladd	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Houston, TX 77062-4731		
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self employed
Date 01/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Michael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78691-0531		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Michael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78691-0531		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 214/295 Rpt: 218/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Michael	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78691-0531		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Michael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78691-0531		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Michael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78691-0531		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Michael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78691-0531		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricci, Sandra	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Thornton, CO 80602-8581		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 215/295 Rpt: 219/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricci, Sandra <hr/> 6 Contributor address; City; State; Zip Code Thornton, CO 80602-8581	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricci, Sandra <hr/> Contributor address; City; State; Zip Code Thornton, CO 80602-8581	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricci, Sandra <hr/> Contributor address; City; State; Zip Code Thornton, CO 80602-8581	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricci, Sandra <hr/> Contributor address; City; State; Zip Code Thornton, CO 80602-8581	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricci, Sandra <hr/> Contributor address; City; State; Zip Code Thornton, CO 80602-8581	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 216/295 Rpt: 220/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Jill	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Richardson, TX 75080-8411		
8 Principal occupation / Job title (See Instructions) Nurse Practitioner		9 Employer (See Instructions) PPIP
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Courtney	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Dallas, TX 75205-4473		
Principal occupation / Job title (See Instructions) Architectural Designer		Employer (See Instructions) BOKA Powell
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Judy	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Austin, TX 78749-3218		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Leap of Joy
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Judy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78749-3218		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Leap of Joy
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Judy	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Austin, TX 78749-3218		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Leap of Joy

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 217/295 Rpt: 221/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Judy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78749-3218	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) Leap of Joy
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Judy <hr/> Contributor address; City; State; Zip Code Austin, TX 78749-3218	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Leap of Joy
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Judy <hr/> Contributor address; City; State; Zip Code Austin, TX 78749-3218	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Leap of Joy
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Judy <hr/> Contributor address; City; State; Zip Code Austin, TX 78749-3218	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Leap of Joy
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ries, Cathy <hr/> Contributor address; City; State; Zip Code Blue Ridge, TX 75424-2357	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Owner horse boarding stables		Employer (See Instructions) Self employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 218/295 Rpt: 222/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ries, Cathy	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Blue Ridge, TX 75424-2357		
8 Principal occupation / Job title (See Instructions) Owner horse boarding stables		9 Employer (See Instructions) Self employed
Date 03/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ries, Cathy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Blue Ridge, TX 75424-2357		
Principal occupation / Job title (See Instructions) Owner horse boarding stables		Employer (See Instructions) Self employed
Date 04/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ries, Cathy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Blue Ridge, TX 75424-2357		
Principal occupation / Job title (See Instructions) Owner horse boarding stables		Employer (See Instructions) Self employed
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ries, Cathy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Blue Ridge, TX 75424-2357		
Principal occupation / Job title (See Instructions) Owner horse boarding stables		Employer (See Instructions) Self employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ries, Cathy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Blue Ridge, TX 75424-2357		
Principal occupation / Job title (See Instructions) Owner horse boarding stables		Employer (See Instructions) Self employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 219/295 Rpt: 223/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riggle, Catherine <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75074-4627	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Children's Health
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rippe, Bruce <hr/> Contributor address; City; State; Zip Code Loveland, CO 80538-9559	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Risinger, Lesley <hr/> Contributor address; City; State; Zip Code Kearny, NJ 07032-3018	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Risinger, Lesley <hr/> Contributor address; City; State; Zip Code Kearny, NJ 07032-3018	Amount of Contribution (\$) \$11.11
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Virginia <hr/> Contributor address; City; State; Zip Code Rocklin, CA 95765-5618	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 220/295 Rpt: 224/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rizzo, Claude <hr/> 6 Contributor address; City; State; Zip Code Chico, CA 95926-9618	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Elaine <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-2312	Amount of Contribution (\$) \$8.34
Principal occupation / Job title (See Instructions) Copy editor		Employer (See Instructions) Self employed
Date 05/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberson, Evelyn <hr/> Contributor address; City; State; Zip Code Richardson, TX 75082-4719	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Aimee <hr/> Contributor address; City; State; Zip Code Dearborn, MI 48128-1346	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) Kroger
Date 06/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Diane <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-3464	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Project Delivery Manager		Employer (See Instructions) Essilor USA

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 221/295 Rpt: 225/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Kelley <hr/> 6 Contributor address; City; State; Zip Code Manhattan Beach, CA 90266-7117	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts Jr., Trevor <hr/> Contributor address; City; State; Zip Code San Jose, CA 95134-2262	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Amazon
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts Jr., Trevor <hr/> Contributor address; City; State; Zip Code San Jose, CA 95134-2262	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Amazon
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts Jr., Trevor <hr/> Contributor address; City; State; Zip Code San Jose, CA 95134-2262	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Amazon
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts Jr., Trevor <hr/> Contributor address; City; State; Zip Code San Jose, CA 95134-2262	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Amazon

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 222/295 Rpt: 226/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts Jr., Trevor <hr/> 6 Contributor address; City; State; Zip Code San Jose, CA 95134-2262	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Amazon
Date 06/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts Jr., Trevor <hr/> Contributor address; City; State; Zip Code San Jose, CA 95134-2262	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Amazon
Date 06/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts-Miller, Jimmy <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-1607	Amount of Contribution (\$) \$55.56
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robson, George <hr/> Contributor address; City; State; Zip Code Glendale, AZ 85302-1055	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Charles <hr/> Contributor address; City; State; Zip Code Washington, DC 20003-1543	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Solidarity Strategies

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 223/295 Rpt: 227/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kathryn <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757-8343	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Editor		9 Employer (See Instructions) Self employed
Date 02/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rohan, Lysa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-4312	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronquillo, Marcos <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238-3756	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Riney Ronquillo Soule PLLC
Date 04/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenbaum, Noel <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912-2706	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Barbara <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-4004	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 224/295 Rpt: 228/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Barbara <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214-4004	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubenstein, Paul <hr/> Contributor address; City; State; Zip Code Wilton Manors, FL 33305-1341	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruggles, Barbara <hr/> Contributor address; City; State; Zip Code Frankfort, IL 60423-9195	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Judith <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053-3703	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rumbaut, Michelle <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155-5835	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 225/295 Rpt: 229/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rumbaut, Michelle	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Seguin, TX 78155-5835		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rumer, Andrew	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code San Francisco, CA 94111-2448		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Terry	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Arlington, TX 76016-3638		
Principal occupation / Job title (See Instructions) Operations		Employer (See Instructions) Corrugated Partners
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Terry	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Arlington, TX 76016-3638		
Principal occupation / Job title (See Instructions) Operations		Employer (See Instructions) Corrugated Partners
Date 03/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Terry	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Arlington, TX 76016-3638		
Principal occupation / Job title (See Instructions) Operations		Employer (See Instructions) Corrugated Partners

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 226/295 Rpt: 230/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Terry	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Arlington, TX 76016-3638		
8 Principal occupation / Job title (See Instructions) Operations		9 Employer (See Instructions) Corrugated Partners
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Terry	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Arlington, TX 76016-3638		
Principal occupation / Job title (See Instructions) Operations		Employer (See Instructions) Corrugated Partners
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Terry	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Arlington, TX 76016-3638		
Principal occupation / Job title (See Instructions) Operations		Employer (See Instructions) Corrugated Partners
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutherford, Shan Jill and James	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78746-1147		
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) Lower Colorado River Authority
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutherford, Shan Jill and James	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78746-1147		
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) Lower Colorado River Authority

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 227/295 Rpt: 231/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutherford, Shan Jill and James <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746-1147	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Editor		9 Employer (See Instructions) Lower Colorado River Authority
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutherford, Shan Jill and James <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-1147	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) Lower Colorado River Authority
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutherford, Shan Jill and James <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-1147	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) Lower Colorado River Authority
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutherford, Shan Jill and James <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-1147	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) Lower Colorado River Authority
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutledge, Elisabeth <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-1812	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 228/295 Rpt: 232/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutledge, Martha	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Richardson, TX 75081-2008		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, Alejandra	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Houston, TX 77006-1119		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Susman Godfrey
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salvador, Jailene	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Garland, TX 75043-4930		
Principal occupation / Job title (See Instructions) Programs Coordinator		Employer (See Instructions) Mi Familia Vota
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sampelo, Mark	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Frisco, TX 75035-4970		
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Northwestern Mutual
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samson, Janrose	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, VA 22203-4062		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) L3Harris

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 229/295 Rpt: 233/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuel, Jada <hr/> 6 Contributor address; City; State; Zip Code Columbia, SC 29209-2599	7 Amount of Contribution (\$) \$2.70
8 Principal occupation / Job title (See Instructions) Miss South Carolina		9 Employer (See Instructions) Jada Samuel
Date 03/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuel, Jada <hr/> Contributor address; City; State; Zip Code Columbia, SC 29209-2599	Amount of Contribution (\$) \$2.70
Principal occupation / Job title (See Instructions) Miss South Carolina		Employer (See Instructions) Jada Samuel
Date 04/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuel, Jada <hr/> Contributor address; City; State; Zip Code Columbia, SC 29209-2599	Amount of Contribution (\$) \$2.70
Principal occupation / Job title (See Instructions) Miss South Carolina		Employer (See Instructions) Jada Samuel
Date 05/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuel, Jada <hr/> Contributor address; City; State; Zip Code Columbia, SC 29209-2599	Amount of Contribution (\$) \$2.70
Principal occupation / Job title (See Instructions) Miss South Carolina		Employer (See Instructions) Jada Samuel
Date 06/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuel, Jada <hr/> Contributor address; City; State; Zip Code Columbia, SC 29209-2599	Amount of Contribution (\$) \$2.70
Principal occupation / Job title (See Instructions) Miss South Carolina		Employer (See Instructions) Jada Samuel

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 230/295 Rpt: 234/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santucci, David <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248-4222	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santucci, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-4222	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santucci, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-4222	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santucci, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-4222	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santucci, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-4222	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 231/295 Rpt: 235/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santucci, David	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code Dallas, TX 75248-4222		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santucci, David	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75248-4222		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santucci, David	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Dallas, TX 75248-4222		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santucci, David	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Dallas, TX 75248-4222		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santucci, David	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75248-4222		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 232/295 Rpt: 236/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayer, James	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code Portland, OR 97218-3837		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayler, Becky	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Sun City, AZ 85373-1638		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheuer, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Nyack, NY 10960-2024		
Principal occupation / Job title (See Instructions) Music		Employer (See Instructions) Self Employed
Date 05/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schindler, Robert	Amount of Contribution (\$) \$3.13
Contributor address; City; State; Zip Code Saint Charles, MO 63304-7355		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroedel, Dale	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code San Francisco, CA 94110-5231		
Principal occupation / Job title (See Instructions) Private Investigator and Political Organizer		Employer (See Instructions) Self employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 233/295 Rpt: 237/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroller, Alex <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005-1568	7 Amount of Contribution (\$) \$16.93
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Michelle <hr/> Contributor address; City; State; Zip Code Columbus, OH 43207-1601	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Michelle <hr/> Contributor address; City; State; Zip Code Columbus, OH 43207-1601	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Michelle <hr/> Contributor address; City; State; Zip Code Columbus, OH 43207-1601	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Michelle <hr/> Contributor address; City; State; Zip Code Columbus, OH 43207-1601	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 234/295 Rpt: 238/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Michelle <hr/> 6 Contributor address; City; State; Zip Code Columbus, OH 43207-1601	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Michelle <hr/> Contributor address; City; State; Zip Code Columbus, OH 43207-1601	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Michelle <hr/> Contributor address; City; State; Zip Code Columbus, OH 43207-1601	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulze, Marian <hr/> Contributor address; City; State; Zip Code Frisco, TX 75033-1557	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Spiritual Director		Employer (See Instructions) Self employed
Date 01/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwart, Cynthia <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-4866	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) Garry Mauro

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 235/295 Rpt: 239/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Robert <hr/> 6 Contributor address; City; State; Zip Code Anchorage, AK 99516-7412	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Construction Management		9 Employer (See Instructions) H. Watt & Scott Inc
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scudder, Kendall <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-4610	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self employed
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seigrist, Steven <hr/> Contributor address; City; State; Zip Code Euless, TX 76040-8753	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Airline Pilot		Employer (See Instructions) Envoy Air
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Selman, Cathryn <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-2521	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sethi, Pooja <hr/> Contributor address; City; State; Zip Code Austin, TX 78730-3457	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 236/295 Rpt: 240/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Settle, Neil <hr/> 6 Contributor address; City; State; Zip Code Cameron, SC 29030-8109	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Severson, Daniel <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78233-4911	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Respiratory Therapist		Employer (See Instructions) VA
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Severson, Daniel <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78233-4911	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Respiratory Therapist		Employer (See Instructions) VA
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Severson, Daniel <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78233-4911	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Respiratory Therapist		Employer (See Instructions) VA
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Severson, Daniel <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78233-4911	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Respiratory Therapist		Employer (See Instructions) VA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 237/295 Rpt: 241/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Severson, Daniel <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78233-4911	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Respiratory Therapist		9 Employer (See Instructions) VA
Date 06/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Severson, Daniel <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78233-4911	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Respiratory Therapist		Employer (See Instructions) VA
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Bonnie <hr/> Contributor address; City; State; Zip Code Austin, TX 78730-4212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Triple Crown
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shamburger, Cristan <hr/> Contributor address; City; State; Zip Code Commerce, TX 75428-3847	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions) Dallas County
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shamburger, Cristan <hr/> Contributor address; City; State; Zip Code Commerce, TX 75428-3847	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions) Dallas County

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 238/295 Rpt: 242/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shamburger, Cristan <hr/> 6 Contributor address; City; State; Zip Code Commerce, TX 75428-3847	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Clerk		9 Employer (See Instructions) Dallas County
Date 04/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shamburger, Cristan <hr/> Contributor address; City; State; Zip Code Commerce, TX 75428-3847	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions) Dallas County
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shamburger, Cristan <hr/> Contributor address; City; State; Zip Code Commerce, TX 75428-3847	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions) Dallas County
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shamburger, Cristan <hr/> Contributor address; City; State; Zip Code Commerce, TX 75428-3847	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions) Dallas County
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharma, Trisha <hr/> Contributor address; City; State; Zip Code Shenandoah, TX 77384-4585	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 239/295 Rpt: 243/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shea, Marilyn	7 Amount of Contribution (\$) \$7.50
6 Contributor address; City; State; Zip Code Portsmouth, RI 02871-5203		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shea, Michael	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78745-2833		
Principal occupation / Job title (See Instructions) Event Producer		Employer (See Instructions) SXSX LLC
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shefik, Perihan	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code Yucca Valley, CA 92284-6465		
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelly, Charles R	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Albuquerque, NM 87108-3560		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) None
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shenghao for TCAD	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Austin, TX 78750-3612		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 240/295 Rpt: 244/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Joseph <hr/> 6 Contributor address; City; State; Zip Code Wichita, KS 67220-2708	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Chief of Staff		9 Employer (See Instructions) Lead For America
Date 02/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherman, Heather <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3954	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Shutt family
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherman, Heather <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3954	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Shutt family
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherstad, Beckie <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2043	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shibata, Janis <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311-2059	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) insurance broker		Employer (See Instructions) Janis C Shibata

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 241/295 Rpt: 245/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shipp, Bill	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Tucson, AZ 85739-1044		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shipp, Bill	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Tucson, AZ 85739-1044		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shipp, Bill	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Tucson, AZ 85739-1044		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shipp, Bill	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Tucson, AZ 85739-1044		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shipp, Bill	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Tucson, AZ 85739-1044		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 242/295 Rpt: 246/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shipp, Bill <hr/> 6 Contributor address; City; State; Zip Code Tucson, AZ 85739-1044	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shook, Beth <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-2146	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Rice University
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shrestha, SJanjeeb <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76132-3751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) TDDC
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shrestha, Sanjeeb <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76132-3751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) TDDC
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shrestha, Sanjeeb <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76132-3751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) TDDC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 243/295 Rpt: 247/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shrestha, Sanjeeb <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76132-3751	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) TDDC
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shrestha, Sanjeeb <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76132-3751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) TDDC
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shrestha, Sanjeeb <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76132-3751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) TDDC
Date 05/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, Mindy <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-4230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, Suzanne <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-2944	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Fiber Artist		Employer (See Instructions) Self employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 244/295 Rpt: 248/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, Suzanne <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248-2944	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Fiber Artist		9 Employer (See Instructions) Self employed
Date 06/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, Suzanne <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-2944	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Fiber Artist		Employer (See Instructions) Self employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siemers-Kennedy, Laura <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-4318	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Mott MacDonald
Date 04/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siemers-Kennedy, Laura <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-4318	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Mott MacDonald
Date 05/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siemers-Kennedy, Laura <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-4318	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Mott MacDonald

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 245/295 Rpt: 249/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siemers-Kennedy, Laura <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019-4318	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Mott MacDonald
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Lisa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-2121	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Harold Simmons Foundation		Employer (See Instructions) President
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simms, Richard <hr/> Contributor address; City; State; Zip Code Denton, TX 76205-8277	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simms, Richard <hr/> Contributor address; City; State; Zip Code Denton, TX 76205-8277	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simms, Richard <hr/> Contributor address; City; State; Zip Code Denton, TX 76205-8277	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 246/295 Rpt: 250/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Jeffrey	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Dallas, TX 75205-3924		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Simon Greenstone Panatier
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simons, Maureen	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Santa Rosa, CA 95404-9628		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Elizabeth	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Richardson, TX 75080-4909		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Lawrence	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Garland, TX 75040-2829		
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) UHU Technologies LLC
Date 06/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Lawrence	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Garland, TX 75040-2829		
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) UHU Technologies LLC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 247/295 Rpt: 251/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Mack <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080-4909	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims, Laura <hr/> Contributor address; City; State; Zip Code Joshua, TX 76058-5137	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skalwold, Eric <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-6086	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, Rita <hr/> Contributor address; City; State; Zip Code Riverside, CA 92505-3823	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, Rita <hr/> Contributor address; City; State; Zip Code Riverside, CA 92505-3823	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 248/295 Rpt: 252/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, Rita <hr/> 6 Contributor address; City; State; Zip Code Riverside, CA 92505-3823	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, Rita <hr/> Contributor address; City; State; Zip Code Riverside, CA 92505-3823	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, Rita <hr/> Contributor address; City; State; Zip Code Riverside, CA 92505-3823	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, Rita <hr/> Contributor address; City; State; Zip Code Riverside, CA 92505-3823	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinner, Wiliam <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90401-2214	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 249/295 Rpt: 253/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sliter, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Durham, NC 27707-5023	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) Self employed
Date 06/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloan, Sasha <hr/> Contributor address; City; State; Zip Code New York, NY 10025-2956	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Social Media
Date 01/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slocum, Candy <hr/> Contributor address; City; State; Zip Code Terrell, TX 75161-7261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smalley, Charles <hr/> Contributor address; City; State; Zip Code Madison, WI 53704-1012	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Dawn <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218-4508	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Petroleum Analyst Coordinator		Employer (See Instructions) Netherland Sewell & Associates Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 250/295 Rpt: 254/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Donald	7 Amount of Contribution (\$) \$8.34
6 Contributor address; City; State; Zip Code Austin, TX 78752-4527		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Emily	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Lakeway, TX 78734-4358		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, June	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Burleson, TX 76028-7486		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Leslie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Edmonds, WA 98020-3931		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Antioch seattle
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Libby	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Ponca City, OK 74601-3349		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 251/295 Rpt: 255/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Libby <hr/> 6 Contributor address; City; State; Zip Code Ponca City, OK 74601-3349	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Libby <hr/> Contributor address; City; State; Zip Code Ponca City, OK 74601-3349	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Libby <hr/> Contributor address; City; State; Zip Code Ponca City, OK 74601-3349	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Libby <hr/> Contributor address; City; State; Zip Code Ponca City, OK 74601-3349	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Libby <hr/> Contributor address; City; State; Zip Code Ponca City, OK 74601-3349	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 252/295 Rpt: 256/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Paul <hr/> 6 Contributor address; City; State; Zip Code Oakton, VA 22124-1314	7 Amount of Contribution (\$) \$90.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Robin <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-5424	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Robin <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-5424	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Zane <hr/> Contributor address; City; State; Zip Code Union City, NJ 07087-5333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Trainee		Employer (See Instructions) Munich Re
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Zane <hr/> Contributor address; City; State; Zip Code Union City, NJ 07087-5333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Trainee		Employer (See Instructions) Munich Re

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 253/295 Rpt: 257/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Zane <hr/> 6 Contributor address; City; State; Zip Code Union City, NJ 07087-5333	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Trainee		9 Employer (See Instructions) Munich Re
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Zane <hr/> Contributor address; City; State; Zip Code Union City, NJ 07087-5333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Trainee		Employer (See Instructions) Munich Re
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Zane <hr/> Contributor address; City; State; Zip Code Union City, NJ 07087-5333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Trainee		Employer (See Instructions) Munich Re
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Zane <hr/> Contributor address; City; State; Zip Code Union City, NJ 07087-5333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Trainee		Employer (See Instructions) Munich Re
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Mollie <hr/> Contributor address; City; State; Zip Code Austin, TX 78750-8153	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 254/295 Rpt: 258/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Somabut, Lizzie <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230-2727	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Therapist		9 Employer (See Instructions) Healing House
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Diana <hr/> Contributor address; City; State; Zip Code Austin, TX 78751-1311	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spiwak, Alana <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-5415	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Psychiatrist		Employer (See Instructions) Self employed
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprute, Dana <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-5631	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Ascension
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Jack <hr/> Contributor address; City; State; Zip Code Austin, TX 78739-1733	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 255/295 Rpt: 259/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Jack <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739-1733	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Starry, Steffani <hr/> Contributor address; City; State; Zip Code Allen, TX 75013-6524	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steckler, Bruce <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-3431	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Steckler Wayne & Love PLLC
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sternweis, Paul <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-2331	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Robert <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232-4962	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 256/295 Rpt: 260/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Robert <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78232-4962	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self employed
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steves, Buddy <hr/> Contributor address; City; State; Zip Code Houston, TX 77030-3602	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Chair		Employer (See Instructions) Financial Casualty and Surety, Inc.
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Jodi <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75022-4373	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Lynn <hr/> Contributor address; City; State; Zip Code Austin, TX 78723-4542	Amount of Contribution (\$) \$4.17
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Travis County
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart Lendvay, Jessica <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218-1004	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Jessica Stewart Lendvay

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 257/295 Rpt: 261/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokdyk, Lisa <hr/> 6 Contributor address; City; State; Zip Code Southlake, TX 76092-5830	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) FA		9 Employer (See Instructions) AA
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes, Wendy <hr/> Contributor address; City; State; Zip Code Jamestown, CO 80455-0205	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Anna <hr/> Contributor address; City; State; Zip Code Allen, TX 75013-1201	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Project Coordinator		Employer (See Instructions) Pinnacle Facility Engineering
Date 05/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stough, Emily <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91104-1442	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Jet Propulsion Laboratory
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stough, Emily <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91104-1442	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Jet Propulsion Laboratory

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 258/295 Rpt: 262/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stough, Emily	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Pasadena, CA 91104-1442		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Jet Propulsion Laboratory
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strassmann, Diana	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Houston, TX 77056-1101		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Rice University
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strayn, Darlene	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Chandler, TX 75758-1918		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stromsness, Rune	Amount of Contribution (\$) \$3.57
Contributor address; City; State; Zip Code Oakland, CA 94607-3845		
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) University of California
Date 04/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stromsness, Rune	Amount of Contribution (\$) \$3.13
Contributor address; City; State; Zip Code Oakland, CA 94607-3845		
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) University of California

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 259/295 Rpt: 263/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stromsness, Rune	7 Amount of Contribution (\$) \$8.33
6 Contributor address; City; State; Zip Code Oakland, CA 94607-3845		
8 Principal occupation / Job title (See Instructions) IT Manager		9 Employer (See Instructions) University of California
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strum, Shirley	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Encinitas, CA 92024-6558		
Principal occupation / Job title (See Instructions) Professor of Graduate Division		Employer (See Instructions) University of California San Diego
Date 06/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stubblefield, Raymond	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77009-1861		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stubbs, Judy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Antonio, TX 78250-4483		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stucko, Craig	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Commack, NY 11725-1619		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Royal Products

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 260/295 Rpt: 264/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suarez, Victoria <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080-5115	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Dallas ISD
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sundaram, Anila <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-2232	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sundberg, Terri <hr/> Contributor address; City; State; Zip Code Corinth, TX 76210-3075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UNT
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sundberg, Terri <hr/> Contributor address; City; State; Zip Code Corinth, TX 76210-3075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UNT
Date 03/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sundberg, Terri <hr/> Contributor address; City; State; Zip Code Corinth, TX 76210-3075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UNT

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 261/295 Rpt: 265/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sundberg, Terri	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Corinth, TX 76210-3075		
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) UNT
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sundberg, Terri	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Corinth, TX 76210-3075		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UNT
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sundberg, Terri	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Corinth, TX 76210-3075		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UNT
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sung, Anne	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77063-6109		
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Cindy	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Carolina Beach, NC 28428-0926		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 262/295 Rpt: 266/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suzuki, Zachary	7 Amount of Contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code Plano, TX 75025-4567		
8 Principal occupation / Job title (See Instructions) Software Consultant		9 Employer (See Instructions) Zeal IT Consultants
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweeney, Cathy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Richardson, TX 75080-2965		
Principal occupation / Job title (See Instructions) Clergy		Employer (See Instructions) Arapaho United Methodist Church
Date 06/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweeney, Sandy	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Richardson, TX 75080-2319		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweet, Elaine	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Dallas, TX 75248-5245		
Principal occupation / Job title (See Instructions) Contract Negotiator		Employer (See Instructions) CBRE
Date 03/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swierczek, Stephen	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Frederica, DE 19946-2921		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 263/295 Rpt: 267/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Linda <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75081-0002	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sztamenits, Dianne <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-4484	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tafoya, Michelle <hr/> Contributor address; City; State; Zip Code Los Lunas, NM 87031-8328	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Takacs, Jeff <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48105-2274	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) University of Michigan Hospital
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Takacs, Jeff <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48105-2274	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) University of Michigan Hospital

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 264/295 Rpt: 268/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tallman, Vicki <hr/> 6 Contributor address; City; State; Zip Code League City, TX 77573-5788	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tansill, Roy <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418-6509	Amount of Contribution (\$) \$1.06
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tatman, Arva <hr/> Contributor address; City; State; Zip Code Richardson, TX 75082-4508	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tatro, Danielle <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206-5012	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teaching Assistant		Employer (See Instructions) SMU
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tau, Jocelyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-3664	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) District Director		Employer (See Instructions) Congressman Lloyd Doggett

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 265/295 Rpt: 269/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Blair <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248-3044	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Academic Advisor		9 Employer (See Instructions) UT Dallas
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Blair <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Academic Advisor		Employer (See Instructions) UT Dallas
Date 03/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Blair <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Academic Advisor		Employer (See Instructions) UT Dallas
Date 04/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Blair <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Academic Advisor		Employer (See Instructions) UT Dallas
Date 05/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Blair <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Academic Advisor		Employer (See Instructions) UT Dallas

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 266/295 Rpt: 270/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Blair <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248-3044	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Academic Advisor		9 Employer (See Instructions) UT Dallas
Date 02/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Duncan <hr/> Contributor address; City; State; Zip Code Bryan, TX 77803-4411	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Katherine <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-5151	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Tech		Employer (See Instructions) Amazon
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Mae <hr/> Contributor address; City; State; Zip Code Farmers Branch, TX 75234-2451	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Mae <hr/> Contributor address; City; State; Zip Code Farmers Branch, TX 75234-2451	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 267/295 Rpt: 271/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Mae	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Farmers Branch, TX 75234-2451		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Mae	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Farmers Branch, TX 75234-2451		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Mae	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Farmers Branch, TX 75234-2451		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Michael	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Delmar, NY 12054-2631		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Albany
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor-Colino, Nia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Houston, TX 77044-4923		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 268/295 Rpt: 272/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teplin, Debra <hr/> 6 Contributor address; City; State; Zip Code Durham, NC 27705-4154	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas AFT Cope Fund <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-6536	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thach, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243-8065	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Software consultant		Employer (See Instructions) Zeal IT Consultants
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thames, Nathaniel <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012-4823	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) AISD
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomason, Heidi <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248-1756	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Self employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 269/295 Rpt: 273/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomason, Heidi <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78248-1756	7 Amount of Contribution (\$) \$14.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Self employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thornton, Thelma <hr/> Contributor address; City; State; Zip Code Lake Lure, NC 28746-9254	Amount of Contribution (\$) \$8.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tibbs, Rita Fe <hr/> Contributor address; City; State; Zip Code Houston, TX 77063-1905	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lab pathology		Employer (See Instructions) HMU
Date 01/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tieu, Kathy <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90804-3125	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tilton Jones, Carrie <hr/> Contributor address; City; State; Zip Code Portland, OR 97219-4981	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) student		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 270/295 Rpt: 274/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tippey, Trent <hr/> 6 Contributor address; City; State; Zip Code Benson, IL 61516-9760	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Caterpillar Inc
Date 03/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, David <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-4404	Amount of Contribution (\$) \$16.67
Principal occupation / Job title (See Instructions) Cattle rancher		Employer (See Instructions) Wray-Todd Ranch LLC
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toland, Lamar <hr/> Contributor address; City; State; Zip Code Palmdale, CA 93550-8329	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toland, Lamar <hr/> Contributor address; City; State; Zip Code Palmdale, CA 93550-8329	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toland, Lamar <hr/> Contributor address; City; State; Zip Code Palmdale, CA 93550-8329	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 271/295 Rpt: 275/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toland, Lamar <hr/> 6 Contributor address; City; State; Zip Code Palmdale, CA 93550-8329	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toland, Lamar <hr/> Contributor address; City; State; Zip Code Palmdale, CA 93550-8329	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toland, Lamar <hr/> Contributor address; City; State; Zip Code Palmdale, CA 93550-8329	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomke, Kristen <hr/> Contributor address; City; State; Zip Code Bay City, MI 48706-3499	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Optum Health
Date 05/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomlinson, Wendy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Customer service		Employer (See Instructions) Guardian mortgage

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 272/295 Rpt: 276/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toperzer, Chuck <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75042-4650	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Tomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-6204	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tran, Jimmy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75235-8301	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self employed
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tremper, Marilyn <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006-8017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self employed
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tremper, Marilyn <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006-8017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 273/295 Rpt: 277/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tremper, Marilyn <hr/> 6 Contributor address; City; State; Zip Code Boerne, TX 78006-8017	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Self employed
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tremper, Marilyn <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006-8017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self employed
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tremper, Marilyn <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006-8017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self employed
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tremper, Marilyn <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006-8017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Roberto <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633-5451	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 274/295 Rpt: 278/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuchman, Ellen <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205-3038	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self employed
Date 04/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Brittany <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130-6341	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Vending		Employer (See Instructions) HRV
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Byron <hr/> Contributor address; City; State; Zip Code Marble Falls, TX 78654-6005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tull, Justin <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006-4737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler, Heidi <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006-7713	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) Caregiving consultant		Employer (See Instructions) Self employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 275/295 Rpt: 279/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler, Heidi <hr/> 6 Contributor address; City; State; Zip Code Boerne, TX 78006-7713	7 Amount of Contribution (\$) \$3.57
8 Principal occupation / Job title (See Instructions) caregiving consultant		9 Employer (See Instructions) Self employed
Date 04/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler, Heidi <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006-7713	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) caregiving consultant		Employer (See Instructions) Self employed
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Uncapher, Jeffrey <hr/> Contributor address; City; State; Zip Code Portland, OR 97222-2913	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00002766) United Food and Commercial Workers International Union Action Ballot <hr/> Contributor address; City; State; Zip Code Washington, DC 20006-1502	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urquhart, Steven <hr/> Contributor address; City; State; Zip Code Roanoke, VA 24015-3035	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 276/295 Rpt: 280/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vales, Noel <hr/> 6 Contributor address; City; State; Zip Code Irvine, CA 92602-1814	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Sheppard Mullin Richter & Hampton LLP
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valtierra, Mark <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91107-5924	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Deloitte
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderbilt, Emily <hr/> Contributor address; City; State; Zip Code Houston, TX 77079-5915	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Assistant Principal		Employer (See Instructions) KIPP TX Public Schools
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velek, Courtney <hr/> Contributor address; City; State; Zip Code Boerne, TX 78015-4704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Self employed
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Frances <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308-3316	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 277/295 Rpt: 281/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Kim <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230-2368	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self employed
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Libby <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-5501	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vormelker, Eric <hr/> Contributor address; City; State; Zip Code Austin, TX 78752-4525	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Technical Coordinator		Employer (See Instructions) Texas Health and Human Services Commission
Date 06/03/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00835587</u>) Vote Save America PAC <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90038-2588	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vroom, Anne Clayton <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-5521	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 278/295 Rpt: 282/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Audrey <hr/> 6 Contributor address; City; State; Zip Code Billings, MT 59101-3732	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Kristen <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034-5629	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wainwright, Leah <hr/> Contributor address; City; State; Zip Code Seminole, OK 74868-2449	Amount of Contribution (\$) \$2.70
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Leah Wainwright (contract)
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wainwright, Leah <hr/> Contributor address; City; State; Zip Code Seminole, OK 74868-2449	Amount of Contribution (\$) \$2.70
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Leah Wainwright (contract)
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wainwright, Leah <hr/> Contributor address; City; State; Zip Code Seminole, OK 74868-2449	Amount of Contribution (\$) \$2.70
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Leah Wainwright (contract)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 279/295 Rpt: 283/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wainwright, Leah <hr/> 6 Contributor address; City; State; Zip Code Seminole, OK 74868-2449	7 Amount of Contribution (\$) \$2.70
8 Principal occupation / Job title (See Instructions) Registered Nurse		9 Employer (See Instructions) Leah Wainwright (contract)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wales, Kurt <hr/> Contributor address; City; State; Zip Code Hereford, TX 79045-7133	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) Self employed
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waller, Judith <hr/> Contributor address; City; State; Zip Code Garland, TX 75044-2044	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Carolyn <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-7033	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walton, Casidy <hr/> Contributor address; City; State; Zip Code Allen, TX 75002-3003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Recruiter		Employer (See Instructions) Zeal IT Consultants

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 280/295 Rpt: 284/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waltz, Amy <hr/> 6 Contributor address; City; State; Zip Code Cambridge, MA 02138-3328	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Xiaoying <hr/> Contributor address; City; State; Zip Code Cardiff By The Sea, CA 92007-1130	Amount of Contribution (\$) \$2.14
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Garrett <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201-7210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sr Manager		Employer (See Instructions) Disney Streaming Services
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Mary <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-3151	Amount of Contribution (\$) \$4.17
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Ascension
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Mike <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212-3954	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 281/295 Rpt: 285/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warrick, James <hr/> 6 Contributor address; City; State; Zip Code Winchester, MA 01890-1037	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Plymouth Rock Assurance Corp.
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Nan <hr/> Contributor address; City; State; Zip Code Buda, TX 78610-3354	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Ut Austin
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Durward <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204-7482	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Annette <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056-2215	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Zeal IT Consultant
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Ann <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78414-3560	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 282/295 Rpt: 286/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Ann	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Corpus Christi, TX 78414-3560		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Ann	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Corpus Christi, TX 78414-3560		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Ann	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Corpus Christi, TX 78414-3560		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Ann	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Corpus Christi, TX 78414-3560		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Ann	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Corpus Christi, TX 78414-3560		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 283/295 Rpt: 287/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Lisa <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739-5628	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Business psychologist		9 Employer (See Instructions) Self employed
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wei, Mingyuan <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681-2741	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Real International
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiner, Rich <hr/> Contributor address; City; State; Zip Code Manhattan Beach, CA 90266-4528	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinstein, Hilary <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107-2799	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinstein, Steven <hr/> Contributor address; City; State; Zip Code Warwick, MA 01378-9330	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) psychotherapist		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 284/295 Rpt: 288/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weisbart, Jan	7 Amount of Contribution (\$) \$18.00
6 Contributor address; City; State; Zip Code Los Angeles, CA 90035-2920		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weisbrod, Carl	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75230-2929		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Keely	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Los Angeles, CA 90046-7536		
Principal occupation / Job title (See Instructions) Coordinator		Employer (See Instructions) NBCUniversal
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wen, Frederick	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77079-3176		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Donato Brown Pool & Moehlmann PLLC
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wening, Mark	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Camarillo, CA 93010-9283		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 285/295 Rpt: 289/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werick, Tracy	7 Amount of Contribution (\$) \$12.92
6 Contributor address; City; State; Zip Code Buffalo, NY 14216-2115		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wernsman, Dorothy	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75248-5331		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Cass	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Georgetown, TX 78628-1158		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Ardis	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Rhineland, WI 54501-9754		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Ardis	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Rhineland, WI 54501-9754		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 286/295 Rpt: 290/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Ardis <hr/> 6 Contributor address; City; State; Zip Code Rhineland, WI 54501-9754	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) none
Date 04/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Ardis <hr/> Contributor address; City; State; Zip Code Rhineland, WI 54501-9754	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Wayne <hr/> Contributor address; City; State; Zip Code Austin, TX 78758-3811	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiley, Robert <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204-2638	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Rob Wiley P.C.
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Teri <hr/> Contributor address; City; State; Zip Code Florence, MA 01062-1450	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 287/295 Rpt: 291/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Donald G.	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Midlothian, TX 76065-3836	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Alamogordo, NM 88310-6413	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Judith	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Portland, OR 97203-3960	
Principal occupation / Job title (See Instructions) General Mgr of Operations		Employer (See Instructions) The New Stack
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Kenneth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Rowlett, TX 75089-3074	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Kenneth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Rowlett, TX 75089-3074	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 288/295 Rpt: 292/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Kenneth	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Rowlett, TX 75089-3074		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Kenneth	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Rowlett, TX 75089-3074		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Kenneth	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Rowlett, TX 75089-3074		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Kenneth	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Rowlett, TX 75089-3074		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Brian	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Garland, TX 75042-8462		
Principal occupation / Job title (See Instructions) Civil engineer		Employer (See Instructions) Texas Sterling

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 289/295 Rpt: 293/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, John <hr/> 6 Contributor address; City; State; Zip Code Honolulu, HI 96822-2427	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self employed
Date 05/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willis, Jonna <hr/> Contributor address; City; State; Zip Code Farmers Branch, TX 75234-6390	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Flight attendant		Employer (See Instructions) American Airlines
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Paul <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-1075	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, Craig <hr/> Contributor address; City; State; Zip Code Houston, TX 77021-2776	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wittig, William <hr/> Contributor address; City; State; Zip Code Cumming, GA 30040-1356	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 290/295 Rpt: 294/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witty, Joanne	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Bedford Hills, NY 10507-2208		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolff, Robert	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Chapel Hill, NC 27517-8522		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolk, Linda	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Newtonville, MA 02460-2015		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Richard	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Bastrop, TX 78602-3572		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas MD Anderson
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodward, Cheryl	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Dallas, TX 75223-1227		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 291/295 Rpt: 295/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wooton, Annika <hr/> 6 Contributor address; City; State; Zip Code Wichita, KS 67203-3052	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Comms manager		9 Employer (See Instructions) Lead for America
Date 06/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worden, Ira <hr/> Contributor address; City; State; Zip Code Kirkland, WA 98034-2864	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worth, Deidre <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384-3856	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wren, Jennifer <hr/> Contributor address; City; State; Zip Code Decatur, TX 76234-3756	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) BPW Law
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Debra <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081-2526	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Volunteer Coordinator		Employer (See Instructions) Heart to Heart Hospice

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 292/295 Rpt: 296/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Debra <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75081-2526	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Volunteer Coordinator		9 Employer (See Instructions) Heart to Heart Hospice
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Xeros, Peter <hr/> Contributor address; City; State; Zip Code Burr Ridge, IL 60527-5151	Amount of Contribution (\$) \$14.29
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Grainger
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yallup, Marlene A. <hr/> Contributor address; City; State; Zip Code Wapato, WA 98951-0325	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) OAV		Employer (See Instructions) Yakama Nation
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Bob <hr/> Contributor address; City; State; Zip Code Spring, TX 77380-3344	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Robert <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380-3344	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) InterCom

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 293/295 Rpt: 297/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Robert <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77380-3344	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Trainer		9 Employer (See Instructions) InterCom
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Robert <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380-3344	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) InterCom
Date 06/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Robert <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380-3344	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) InterCom
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yingling, Terry <hr/> Contributor address; City; State; Zip Code Newbury Park, CA 91320-2062	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Drs Hanzelik & Horton
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yoon, Chloe <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201-5816	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) FCPS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 294/295 Rpt: 298/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Sharon <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75220-2024	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Investor		9 Employer (See Instructions) Quadrant Holdings
Date 06/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Sharon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-2024	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Quadrant Holdings
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Sharon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-2024	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Quadrant Holdings
Date 01/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zauhar, Joni <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) Dell Childrens / Ascension/ UT
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zauhar, Joni <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) Dell Childrens / Ascension/ UT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 295/295 Rpt: 299/347
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zauhar, Joni <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78702	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Nurse Practitioner		9 Employer (See Instructions) Dell Childrens / Ascension/ UT
Date 04/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zauhar, Joni <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) Dell Childrens / Ascension/ UT
Date 05/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zauhar, Joni <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) Dell Childrens / Ascension/ UT
Date 06/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zauhar, Joni <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) Dell Childrens / Ascension/ UT
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zhang, Grace <hr/> Contributor address; City; State; Zip Code Katy, TX 77494-0490	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Not Employed

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/2 Rpt: 300/347	
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 03/16/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klion, Amy	8 Amount of contribution (\$) \$1,147.50	9 In-kind contribution description Fundraising event catering
	7 Contributor address; City; State; Zip Code Dallas, TX 75225-1626	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Not Employed		11 Employer (FOR NON-JUDICIAL) (See instructions) Not Employed	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 03/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klion, Howard	Amount of contribution (\$) \$486.40	In-kind contribution description Valet parking for fundraising event
	Contributor address; City; State; Zip Code Dallas, TX 75225-1626	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Not Employed		Employer (FOR NON-JUDICIAL) (See instructions) Not Employed	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lone Star Project Nonfederal	Amount of contribution (\$) \$15,000.00	In-kind contribution description Research
	Contributor address; City; State; Zip Code Washington, DC 20003-2611	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/2 Rpt: 301/347	
2 FILER NAME Bishop, Averie Danielle (Ms.)		3 Filer ID (Ethics Commission Filers) 00087886	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/30/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Democratic Party	8 Amount of contribution (\$) \$2,231.89	9 In-kind contribution description Campaign staff taxes
	7 Contributor address; City; State; Zip Code Austin, TX 78761-5707	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Democratic Party	Amount of contribution (\$) \$2,923.00	In-kind contribution description Campaign staff insurance
	Contributor address; City; State; Zip Code Austin, TX 78761-5707	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Democratic Party	Amount of contribution (\$) \$22,580.67	In-kind contribution description Campaign staff salary
	Contributor address; City; State; Zip Code Austin, TX 78761-5707	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/18/2024	5 Payee name AM Strategies LLC	
6 Amount (\$) \$6,000.00	7 Payee address; City; State; Zip Code 122 E 4th St Houston, TX 77007-2502	
8 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 Fundraising consulting services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/04/2024	Payee name AM Strategies LLC	
Amount (\$) \$6,000.00	Payee address; City; State; Zip Code 122 E 4th St Houston, TX 77007-2502	
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 Fundraising consulting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/11/2024	Payee name AM Strategies LLC	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 122 E 4th St Houston, TX 77007-2502	
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 Fundraising consulting services
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.

1 Total pages Schedule F1: Sch: 2/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/11/2024	5 Payee name AM Strategies LLC	
6 Amount (\$) \$6,000.00	7 Payee address; City; State; Zip Code 122 E 4th St Houston, TX 77007-2502	
8 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 Fundraising consulting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/16/2024	Payee name AM Strategies LLC	
Amount (\$) \$4,500.00	Payee address; City; State; Zip Code 122 E 4th St Houston, TX 77007-2502	
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 Fundraising consulting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2024	Payee name AM Strategies LLC	
Amount (\$) \$4,500.00	Payee address; City; State; Zip Code 122 E 4th St Houston, TX 77007-2502	
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 Fundraising consulting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 3/45 Rpt:	2	FILER NAME Bishop, Averie Danielle (Ms.)	3	Filer ID (Ethics Commission Filers) 00087886
4	Date 01/07/2024	5	Payee name ActBlue		
6	Amount (\$) \$4,278.37	7	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fees - 1/7/24-6/30/24		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 04/30/2024		Payee name Airbnb		
	Amount (\$) \$607.80		Payee address; City; State; Zip Code 888 Brannan St San Francisco, CA 94103-4928		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Lodging for State Democratic Convention		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 05/15/2024		Payee name American Airlines		
	Amount (\$) \$10.09		Payee address; City; State; Zip Code PO Box 619616 Dallas, TX 75261-9616		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Travel wifi		
		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.

1 Total pages Schedule F1: Sch: 4/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/15/2024	5 Payee name American Airlines	
6 Amount (\$) \$415.95	7 Payee address; City; State; Zip Code PO Box 619616 Dallas, TX 75261-9616	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Campaign travel - airfare
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2024	Payee name American Airlines	
Amount (\$) \$415.95	Payee address; City; State; Zip Code PO Box 619616 Dallas, TX 75261-9616	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Campaign travel - airfare
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2024	Payee name Blue Nation Strategies	
Amount (\$) \$664.99	Payee address; City; State; Zip Code 5900 Harwick Rd Bethesda, MD 20816-1103	
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 Volunteer post card
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/29/2024	5 Payee name Bumperactive	
6 Amount (\$) \$983.45	7 Payee address; City; State; Zip Code 5903 Burnet Rd Austin, TX 78757-3224	
8 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 Campaign merchandise
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/15/2024	Payee name Bumperactive	
Amount (\$) \$370.96	Payee address; City; State; Zip Code 5903 Burnet Rd Austin, TX 78757-3224	
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 Campaign merchandise
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/15/2024	Payee name Bumperactive	
Amount (\$) \$50.53	Payee address; City; State; Zip Code 5903 Burnet Rd Austin, TX 78757-3224	
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 Campaign merchandise
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.

1 Total pages Schedule F1: Sch: 6/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/15/2024	5 Payee name Bumperactive	
6 Amount (\$) \$50.23	7 Payee address; City; State; Zip Code 5903 Burnet Rd Austin, TX 78757-3224	
8 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 Campaign merchandise
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/15/2024	Payee name Bumperactive	
Amount (\$) \$116.88	Payee address; City; State; Zip Code 5903 Burnet Rd Austin, TX 78757-3224	
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 Campaign merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/15/2024	Payee name Bumperactive	
Amount (\$) \$45.58	Payee address; City; State; Zip Code 5903 Burnet Rd Austin, TX 78757-3224	
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 Campaign merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/09/2024	5 Payee name Bumperactive	
6 Amount (\$) \$75.14	7 Payee address; City; State; Zip Code 5903 Burnet Rd Austin, TX 78757-3224	
8 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 Campaign merchandise
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2024	Payee name Bumperactive	
Amount (\$) \$6.25	Payee address; City; State; Zip Code 5903 Burnet Rd Austin, TX 78757-3224	
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 Campaign merchandise
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/28/2024	Payee name Bumperactive	
Amount (\$) \$6.07	Payee address; City; State; Zip Code 5903 Burnet Rd Austin, TX 78757-3224	
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 Campaign merchandise
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.

1 Total pages Schedule F1: Sch: 8/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/23/2024	5 Payee name Canva	
6 Amount (\$) \$12.99	7 Payee address; City; State; Zip Code 3212 E Cesar Chavez St Austin, TX 78702-4938	
8 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 Digital design subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/23/2024	Payee name Canva	
Amount (\$) \$12.99	Payee address; City; State; Zip Code 3212 E Cesar Chavez St Austin, TX 78702-4938	
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 Digital design subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/01/2024	Payee name Canva	
Amount (\$) \$99.00	Payee address; City; State; Zip Code 3212 E Cesar Chavez St Austin, TX 78702-4938	
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 Digital design subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/23/2024	5 Payee name Canva	
6 Amount (\$) \$12.99	7 Payee address; City; State; Zip Code 3212 E Cesar Chavez St Austin, TX 78702-4938	
8 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 Digital design subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2024	Payee name Casita Bakery LLC	
Amount (\$) \$327.13	Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
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 Food for volunteers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2024	Payee name Casita Bakery LLC	
Amount (\$) \$14.29	Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
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 Campaign meeting meal
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.

1 Total pages Schedule F1: Sch: 11/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
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4 Date 02/26/2024	5 Payee name Casita Bakery LLC
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6 Amount (\$) \$79.24	7 Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359
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8 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 Food for volunteers
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/26/2024	Payee name Casita Bakery LLC
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Amount (\$) \$26.63	Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359
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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 Food for volunteers
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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 02/26/2024	Payee name Casita Bakery LLC
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Amount (\$) \$63.32	Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359
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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 Food for volunteers
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/26/2024	5 Payee name Casita Bakery LLC	
6 Amount (\$) \$7.04	7 Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
8 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 Campaign meeting meal
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/04/2024	Payee name Casita Bakery LLC	
Amount (\$) \$167.69	Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
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 Food for volunteers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/04/2024	Payee name Casita Bakery LLC	
Amount (\$) \$21.11	Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
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 Campaign meeting meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/04/2024	5 Payee name Casita Bakery LLC	
6 Amount (\$) \$127.94	7 Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
8 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 Food for volunteers
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/18/2024	Payee name Casita Bakery LLC	
Amount (\$) \$54.89	Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
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 Food for volunteers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/18/2024	Payee name Casita Bakery LLC	
Amount (\$) \$6.95	Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
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 Campaign meeting meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/18/2024	5 Payee name Casita Bakery LLC	
6 Amount (\$) \$7.77	7 Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
8 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 Campaign meeting meal
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/18/2024	Payee name Casita Bakery LLC	
Amount (\$) \$8.50	Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
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 Campaign meeting meal
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2024	Payee name Casita Bakery LLC	
Amount (\$) \$7.22	Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
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 Campaign meeting meal
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.

1 Total pages Schedule F1: Sch: 15/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/25/2024	5 Payee name Casita Bakery LLC	
6 Amount (\$) \$15.91	7 Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
8 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 Campaign meeting meal
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2024	Payee name Casita Bakery LLC	
Amount (\$) \$12.34	Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
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 Campaign meeting meal
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2024	Payee name Casita Bakery LLC	
Amount (\$) \$13.97	Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
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 Campaign meeting meal
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.

1 Total pages Schedule F1: Sch: 16/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/25/2024	5 Payee name Casita Bakery LLC	
6 Amount (\$) \$15.59	7 Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
8 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 Campaign meeting meal
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/20/2024	Payee name Casita Bakery LLC	
Amount (\$) \$64.08	Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
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 Food for volunteers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/20/2024	Payee name Casita Bakery LLC	
Amount (\$) \$22.72	Payee address; City; State; Zip Code 580 W Arapaho Rd Ste 154 Richardson, TX 75080-4359	
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 Campaign meeting meal
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.

1 Total pages Schedule F1: Sch: 17/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/05/2024	5 Payee name Fiverr	
6 Amount (\$) \$449.86	7 Payee address; City; State; Zip Code 401 Broadway Ste 1500 New York, NY 10013	
8 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 Digital optimization labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/05/2024	Payee name Fiverr	
Amount (\$) \$114.21	Payee address; City; State; Zip Code 401 Broadway Ste 1500 New York, NY 10013	
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 Digital optimization labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/08/2024	Payee name Four Bullets Brewery	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 640 N Interurban St Richardson, TX 75081-3317	
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 Campaign event venue
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/21/2024	5 Payee name Four Bullets Brewery	
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 640 N Interurban St Richardson, TX 75081-3317	
8 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 Election night event venue
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Grassroots Analytics LLC	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 806 7th St NW Ste 3 Washington, DC 20001-3868	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donor list acquisition
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2024	Payee name Gutierrez, Sarah	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765	
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 Campaign operations consulting
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.

1 Total pages Schedule F1: Sch: 19/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/04/2024	5 Payee name Gutierrez, Sarah	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765	
8 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 Campaign operations consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/19/2024	Payee name Gutierrez, Sarah	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765	
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 Campaign operations consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/17/2024	Payee name Gutierrez, Sarah	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765	
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 Campaign operations consulting
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.

1 Total pages Schedule F1: Sch: 20/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/09/2024	5 Payee name Gutierrez, Sarah	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765	
8 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 Campaign operations consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/12/2024	Payee name Gutierrez, Sarah	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765	
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 Campaign operations consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/06/2024	Payee name Hames, John	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 5945 Carroll Dr The Colony, TX 75056-4482	
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 Campaign event entertainment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/16/2024	5 Payee name Hilton - Houston	
6 Amount (\$) \$256.23	7 Payee address; City; State; Zip Code 1600 Lamar St Houston, TX 77010-5012	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Campaign travel lodging
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/16/2024	Payee name Hilton - Houston	
Amount (\$) \$44.00	Payee address; City; State; Zip Code 1600 Lamar St Houston, TX 77010-5012	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Travel parking
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/18/2024	Payee name MailChimp	
Amount (\$) \$117.26	Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE Ste 5000 Atlanta, GA 30308-2172	
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 Email delivery subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
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4 Date 02/20/2024	5 Payee name MailChimp
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6 Amount (\$) \$117.26	7 Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE Ste 5000 Atlanta, GA 30308-2172
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8 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 Email delivery subscription
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/18/2024	Payee name MailChimp
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Amount (\$) \$117.26	Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE Ste 5000 Atlanta, GA 30308-2172
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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 Email delivery subscription
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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 04/18/2024	Payee name MailChimp
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Amount (\$) \$117.26	Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE Ste 5000 Atlanta, GA 30308-2172
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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 Email delivery subscription
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 23/45 Rpt:	2	FILER NAME Bishop, Averie Danielle (Ms.)	3	Filer ID (Ethics Commission Filers) 00087886
4	Date 05/20/2024	5	Payee name MailChimp		
6	Amount (\$) \$117.26	7	Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE Ste 5000 Atlanta, GA 30308-2172		
8	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 Email delivery subscription		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Date 06/18/2024		Candidate/Officeholder name Office sought Office held		
	Amount (\$) \$117.26		Payee name MailChimp		
			Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE Ste 5000 Atlanta, GA 30308-2172		
	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 Email delivery subscription		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Date 01/03/2024		Candidate/Officeholder name Office sought Office held		
	Amount (\$) \$266.50		Payee name NGP VAN		
			Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738		
	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 Campaign database subscription		
		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.

1	Total pages Schedule F1: Sch: 24/45 Rpt:	2	FILER NAME Bishop, Averie Danielle (Ms.)	3	Filer ID (Ethics Commission Filers) 00087886
4	Date 02/02/2024	5	Payee name NGP VAN		
6	Amount (\$) \$266.50	7	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738		
8	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 Campaign database subscription		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 03/04/2024		Payee name NGP VAN		
	Amount (\$) \$266.50		Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738		
	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 Campaign database subscription		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 04/02/2024		Payee name NGP VAN		
	Amount (\$) \$266.50		Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738		
	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 Campaign database subscription		
		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.

1 Total pages Schedule F1: Sch: 25/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/02/2024	5 Payee name NGP VAN	
6 Amount (\$) \$266.50	7 Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
8 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 Campaign database subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/02/2024	Payee name NGP VAN	
Amount (\$) \$106.60	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
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 Campaign database subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/03/2024	Payee name NGP VAN	
Amount (\$) \$106.60	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
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 Campaign database subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 26/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/03/2024	5 Payee name NGP VAN	
6 Amount (\$) \$266.50	7 Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
8 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 Campaign database subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/14/2024	Payee name Notion Labs	
Amount (\$) \$42.64	Payee address; City; State; Zip Code 2300 Harrison St FI 2 San Francisco, CA 94110-2013	
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 Campaign organizational software subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/14/2024	Payee name Notion Labs	
Amount (\$) \$362.44	Payee address; City; State; Zip Code 2300 Harrison St FI 2 San Francisco, CA 94110-2013	
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 Campaign organizational software subscription
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.

1 Total pages Schedule F1: Sch: 27/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 04/15/2024	5 Payee name Notion Labs	
6 Amount (\$) \$217.67	7 Payee address; City; State; Zip Code 2300 Harrison St FI 2 San Francisco, CA 94110-2013	
8 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 Campaign organizational software subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/14/2024	Payee name Notion Labs	
Amount (\$) \$213.20	Payee address; City; State; Zip Code 2300 Harrison St FI 2 San Francisco, CA 94110-2013	
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 Campaign organizational software subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/14/2024	Payee name Notion Labs	
Amount (\$) \$213.20	Payee address; City; State; Zip Code 2300 Harrison St FI 2 San Francisco, CA 94110-2013	
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 Campaign organizational software subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 28/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/10/2024	5 Payee name QuickBooks	
6 Amount (\$) \$31.98	7 Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043-1140	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign accounting software subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2024	Payee name QuickBooks	
Amount (\$) \$47.97	Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043-1140	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign accounting software subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/07/2024	Payee name QuickBooks	
Amount (\$) \$4.42	Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043-1140	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign accounting software subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 29/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/11/2024	5 Payee name QuickBooks	
6 Amount (\$) \$79.95	7 Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043-1140	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign accounting software subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/10/2024	Payee name QuickBooks	
Amount (\$) \$79.95	Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043-1140	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign accounting software subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/10/2024	Payee name QuickBooks	
Amount (\$) \$79.95	Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043-1140	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign accounting software subscription
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.

1 Total pages Schedule F1: Sch: 30/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/10/2024	5 Payee name QuickBooks	
6 Amount (\$) \$79.95	7 Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043-1140	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign accounting software subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/22/2024	Payee name Reilly Echols Printing	
Amount (\$) \$855.18	Payee address; City; State; Zip Code 1710 S Harwood St Dallas, TX 75215-1221	
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 Campaign walk cards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Shusterfallou, Paris	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 385 Shelbourne Ln Phoenixville, PA 19460-5743	
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 Campaign operations consulting
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.

1 Total pages Schedule F1: Sch: 31/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/29/2024	5 Payee name Shusterfallou, Paris	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 385 Shelbourne Ln Phoenixville, PA 19460-5743	
8 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 Campaign operations consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/29/2024	Payee name Shusterfallou, Paris	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 385 Shelbourne Ln Phoenixville, PA 19460-5743	
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 Campaign operations consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/06/2024	Payee name Sonder	
Amount (\$) \$376.61	Payee address; City; State; Zip Code 101 15th St San Francisco, CA 94103-5103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 Campaign travel lodging
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.

1 Total pages Schedule F1: Sch: 32/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/03/2024	5 Payee name Stonewall Democrats of Dallas	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code PO Box 192305 Dallas, TX 75219-8517	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/09/2024	Payee name Texas Democratic Party	
Amount (\$) \$1,300.00	Payee address; City; State; Zip Code PO Box 15707 Austin, TX 78761-5707	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter file access fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/08/2024	Payee name UPS	
Amount (\$) \$9.73	Payee address; City; State; Zip Code 819 W Arapaho Rd Ste 24B Richardson, TX 75080-5040	
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 Printing campaign materials
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 33/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/08/2024	5 Payee name UPS	
6 Amount (\$) \$360.00	7 Payee address; City; State; Zip Code 819 W Arapaho Rd Ste 24B Richardson, TX 75080-5040	
8 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 Printing campaign materials
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/28/2024	Payee name UPS	
Amount (\$) \$15.65	Payee address; City; State; Zip Code 819 W Arapaho Rd Ste 24B Richardson, TX 75080-5040	
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 Printing campaign materials
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/07/2024	Payee name Uber	
Amount (\$) \$17.97	Payee address; City; State; Zip Code 1515 3rd St San Francisco, CA 94158-2211	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Ground transportation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 34/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/07/2024	5 Payee name Uber	
6 Amount (\$) \$19.25	7 Payee address; City; State; Zip Code 1515 3rd St San Francisco, CA 94158-2211	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Ground transportation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/07/2024	Payee name Uber	
Amount (\$) \$34.99	Payee address; City; State; Zip Code 1515 3rd St San Francisco, CA 94158-2211	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Ground transportation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/07/2024	Payee name Uber	
Amount (\$) \$15.97	Payee address; City; State; Zip Code 1515 3rd St San Francisco, CA 94158-2211	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Ground transportation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 35/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/07/2024	5 Payee name Uber	
6 Amount (\$) \$7.73	7 Payee address; City; State; Zip Code 1515 3rd St San Francisco, CA 94158-2211	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Ground transportation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2024	Payee name Uber	
Amount (\$) \$23.94	Payee address; City; State; Zip Code 1515 3rd St San Francisco, CA 94158-2211	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Ground transportation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2024	Payee name Uber	
Amount (\$) \$17.65	Payee address; City; State; Zip Code 1515 3rd St San Francisco, CA 94158-2211	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Ground transportation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 36/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/10/2024	5 Payee name Uber	
6 Amount (\$) \$1.00	7 Payee address; City; State; Zip Code 1515 3rd St San Francisco, CA 94158-2211	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Ground transportation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2024	Payee name Uber	
Amount (\$) \$24.06	Payee address; City; State; Zip Code 1515 3rd St San Francisco, CA 94158-2211	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Ground transportation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2024	Payee name Uber	
Amount (\$) \$15.98	Payee address; City; State; Zip Code 1515 3rd St San Francisco, CA 94158-2211	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Ground transportation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 37/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/10/2024	5 Payee name Uber	
6 Amount (\$) \$11.10	7 Payee address; City; State; Zip Code 1515 3rd St San Francisco, CA 94158-2211	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Ground transportation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2024	Payee name Uber	
Amount (\$) \$15.98	Payee address; City; State; Zip Code 1515 3rd St San Francisco, CA 94158-2211	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Ground transportation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2024	Payee name Uber	
Amount (\$) \$12.26	Payee address; City; State; Zip Code 1515 3rd St San Francisco, CA 94158-2211	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Ground transportation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 38/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 06/10/2024	5 Payee name Uber	
6 Amount (\$) \$17.98	7 Payee address; City; State; Zip Code 1515 3rd St San Francisco, CA 94158-2211	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Ground transportation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2024	Payee name Uber	
Amount (\$) \$7.58	Payee address; City; State; Zip Code 1515 3rd St San Francisco, CA 94158-2211	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Ground transportation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/01/2024	Payee name Weber, Samuel Gage	
Amount (\$) \$875.00	Payee address; City; State; Zip Code 215 Maujer St Apt 3L Brooklyn, NY 11206-1307	
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 Campaign communications consulting
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.

1 Total pages Schedule F1: Sch: 39/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/01/2024	5 Payee name Weber, Samuel Gage	
6 Amount (\$) \$875.00	7 Payee address; City; State; Zip Code 215 Maujer St Apt 3L Brooklyn, NY 11206-1307	
8 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 Campaign communications consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/03/2024	Payee name Weber, Samuel Gage	
Amount (\$) \$875.00	Payee address; City; State; Zip Code 215 Maujer St Apt 3L Brooklyn, NY 11206-1307	
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 Campaign communications consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/06/2024	Payee name Weber, Samuel Gage	
Amount (\$) \$875.00	Payee address; City; State; Zip Code 215 Maujer St Apt 3L Brooklyn, NY 11206-1307	
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 Campaign communications consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 40/45 Rpt:	2	FILER NAME Bishop, Averie Danielle (Ms.)	3	Filer ID (Ethics Commission Filers) 00087886	
4	Date 06/07/2024	5	Payee name Weber, Samuel Gage			
6	Amount (\$) \$875.00	7	Payee address; City; State; Zip Code 215 Maujer St Apt 3L Brooklyn, NY 11206-1307			
8	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 Communications consulting services			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
	Date 01/02/2024		Payee name Wix.com			
	Amount (\$) \$162.37		Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354			
	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 Campaign website development subscription			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
	Date 01/29/2024		Payee name Wix.com			
	Amount (\$) \$26.90		Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354			
	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 Campaign website development subscription			
	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.

1 Total pages Schedule F1: Sch: 41/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 01/29/2024	5 Payee name Wix.com	
6 Amount (\$) \$37.88	7 Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354	
8 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 Campaign website development subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2024	Payee name Wix.com	
Amount (\$) \$36.80	Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354	
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 Campaign website development subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Wix.com	
Amount (\$) \$162.37	Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354	
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 Campaign website development subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 42/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 02/29/2024	5 Payee name Wix.com	
6 Amount (\$) \$162.37	7 Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354	
8 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 Campaign website development subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/29/2024	Payee name Wix.com	
Amount (\$) \$41.13	Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354	
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 Campaign website development subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/01/2024	Payee name Wix.com	
Amount (\$) \$36.80	Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign website development subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 43/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 03/27/2024	5 Payee name Wix.com	
6 Amount (\$) \$36.80	7 Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354	
8 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 Campaign website development subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/01/2024	Payee name Wix.com	
Amount (\$) \$162.37	Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354	
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 Campaign website development subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/29/2024	Payee name Wix.com	
Amount (\$) \$36.80	Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354	
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 Campaign website development subscription
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.

1 Total pages Schedule F1: Sch: 44/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/02/2024	5 Payee name Wix.com	
6 Amount (\$) \$162.37	7 Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354	
8 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 Campaign website development subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/24/2024	Payee name Wix.com	
Amount (\$) \$16.18	Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354	
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 Campaign website development subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/30/2024	Payee name Wix.com	
Amount (\$) \$162.37	Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354	
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 Campaign website development subscription
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.

1 Total pages Schedule F1: Sch: 45/45 Rpt:	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886
4 Date 05/28/2024	5 Payee name Wix.com	
6 Amount (\$) \$36.80	7 Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354	
8 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 Campaign website development subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/27/2024	Payee name Wix.com	
Amount (\$) \$38.97	Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354	
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 Campaign website development subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/27/2024	Payee name Wix.com	
Amount (\$) \$18.78	Payee address; City; State; Zip Code 500 Terry A Francois Blvd FI 6 San Francisco, CA 94158-2354	
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 Campaign website development subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 347/347	2 FILER NAME Bishop, Averie Danielle (Ms.)	3 Filer ID (Ethics Commission Filers) 00087886	
4 Date 03/01/2024	5 Payee name NAACP Garland Branch		
6 Amount (\$) \$60.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 222 Carver St Garland, TX 75040		
8 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 ticket	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held