FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00085309 3 COMMITTEE NAME **OFFICE USE ONLY** The 134 Political Action Committee Date Received **ELECTRONICALLY FILED** 01/14/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P. O. Box 357 Date Hand-delivered or Date Postmarked Change of Address Mineral Wells, TX 76068 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Carla S. NAME NICKNAME LAST **SUFFIX** Porter STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** PO BOX 293 STREET **ADDRESS** (Residence or Business) Palo Pinto, TX 76484 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 293 MAILING **ADDRESS** Palo Pinto, TX 76484 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (940) 329-0514 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
The 134 Political Actio	on Committee		00085309	,
COMMITTEE	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,509.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	11,310.90
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	6,253.2
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
AFFIDAVIT				
		I swear, or affirm, under penalty of pe true and correct and includes all info under Title 15, Election Code.		
			la S. Porter	
		Signature of Ca	ımpaign Treasure	r
AFFIX NOTAR	T STAINIP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said	,1	his the	day
Sworn to and subscribe	ed before me, by the said	, twhich, witness my hand and seal of office.	his the	day
Sworn to and subscribe	ed before me, by the said		his the	day

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

				3 of 54
		EE NAME Political Action Committee	18 Filer ID 00085309	(Ethics Commission Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 7,509.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$
5.		\$		
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	ANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR O	ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 11,310.90
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

	MONET	ARY POLITICAL CONTRIBUTION	ON	IS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 1/31 Rpt: 4/54	
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	Filers)
4	Date 07/21/2024	 Full name of contributor out-of-state PAC (ID# Beebe, Hilary Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Marfa, TX 79843 pation / Job title (See Instructions)	la.	Employer (See Instructions	-, 		
0	Designer	pation / Job title (See Instructions)		Self	·)		
	Date 08/21/2024	Full name of contributor out-of-state PAC (ID# Beebe, Hilary Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$25.00
		Marfa, TX 79843	_		<u>_</u>		
	Principal occu Designer	pation / Job title (See Instructions)		Employer (See Instructions Self	S)		
	Date 09/21/2024	Full name of contributor out-of-state PAC (ID# Beebe, Hilary Contributor address; City; State; Zip Code	:			Amount of Contribution (\$)	\$25.00
		Marfa, TX 79843					
	Principal occu Designer	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 10/21/2024	Full name of contributor out-of-state PAC (ID# Beebe, Hilary Contributor address; City; State; Zip Code Marfa, TX 79843)	•	Amount of Contribution (\$)	\$25.00
	Principal occu Designer	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID# Beebe, Hilary Contributor address; City; State; Zip Code Marfa, TX 79843)		Amount of Contribution (\$)	\$25.00
	Principal occu Designer	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
			•				

	MONET	ARY POLITICAL CONTRIBU	UTION	S		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete	this for	n.	1	Total pages Schedule A1: Sch: 2/31 Rpt: 5/54	
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	r Filers)
4	Date 12/21/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$25.00
_	Deireitad	Marfa, TX 79843	la la	Four leaves (Construction			
8	Designer	pation / Job title (See Instructions)	9	Employer (See Instructions Self	5)		
	Date 07/20/2024	Full name of contributor)	•	Amount of Contribution (\$)	\$10.00
	Principal occu	San Antonio, TX 78212 pation / Job title (See Instructions)	- 1	Employer (See Instructions	<u>s)</u>		
	Librarian	pation / cos tale (coe mondone)		Trinity University	-,		
	Date 08/20/2024	Full name of contributor	AC (ID#:)	•	Amount of Contribution (\$)	\$10.00
		San Antonio, TX 78212					
	Principal occu Librarian	pation / Job title (See Instructions)		Employer (See Instructions Trinity University	5)		
Date 09/20/2024		Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$10.00
	Principal occu Librarian	San Antonio, TX 78212 pation / Job title (See Instructions)		Employer (See Instructions Trinity University	<u> </u> s)		
	Date 10/20/2024	Full name of contributor out-of-state PA Caraway, Bea Contributor address; City; State; Zip Code San Antonio, TX 78212			•	Amount of Contribution (\$)	\$10.00
	Principal occu Librarian	pation / Job title (See Instructions)		Employer (See Instructions Trinity University	5)		

	MONET	ARY POLITICAL CONTRIB	BUTION	IS .		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete	e this for	n.	1	Total pages Schedule A1: Sch: 3/31 Rpt: 6/54	
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	r Filers)
4	Date 11/20/2024	 Full name of contributor	-)	7	Amount of Contribution (\$)	\$10.00
_	Driveries I	San Antonio, TX 78212	la la	Foundation (October to the street)			
8	Principal occu Librarian	pation / Job title (See Instructions)	9	Employer (See Instructions Trinity University	5)		
	Date 12/20/2024	Caraway, Bea	PAC (ID#:)	•	Amount of Contribution (\$)	\$10.00
	Principal occur	San Antonio, TX 78212 pation / Job title (See Instructions)		Employer (See Instructions	<u>s)</u>		
	Librarian	pation / out tale (out moradations)		Trinity University	-,		
	Date 07/06/2024	Full name of contributor out-of-state F Cravens, Richie Contributor address; City; State; Zip Code	PAC (ID#:)	•	Amount of Contribution (\$)	\$25.00
		Mertzon, TX 76941					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 08/06/2024	Full name of contributor out-of-state F Cravens, Richie Contributor address; City; State; Zip Code Mertzon, TX 76941	-)	•	Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 09/06/2024	Full name of contributor out-of-state F Cravens, Richie Contributor address; City; State; Zip Code Mertzon, TX 76941	PAC (ID#:)	•	Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
			,				

	MONET	ARY POLITICAL CONTR	IBUTION	S		SCHEDULI	E A1
	The Instruc	ction Guide explains how to comp	lete this forr	n.	1	Total pages Schedule A1: Sch: 4/31 Rpt: 7/54	
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	n Filers)
4	Date 10/06/2024	 Full name of contributor out-of-star Cravens, Richie Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$25.00
8	Principal occur	Mertzon, TX 76941 pation / Job title (See Instructions)	l g	Employer (See Instructions	;) 		
	Not Employe			Not Employed	,,		
	Date 11/06/2024	Cravens, Richie)		Amount of Contribution (\$)	\$25.00
		Mertzon, TX 76941			<u> </u>		
	Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
	Date 12/06/2024	Full name of contributor out-of-state Cravens, Richie Contributor address; City; State; Zip Code	ate PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Delevie et e e e e	Mertzon, TX 76941		Frankrick (Co. Jackson)	<u></u>		
	Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
	Date 07/01/2024	Gibson, John				Amount of Contribution (\$)	\$50.00
	Principal occu Lawyer	pation / Job title (See Instructions)		Employer (See Instructions GibsonFirm	<u>l</u> s)		
	Date 07/02/2024	Gibson, John	ate PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Lawyer	pation / Job title (See Instructions)		Employer (See Instructions GibsonFirm	;)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	■ A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/31 Rpt: 8/54	
2	FILER NAME The 134 Poli	itical Action Committee		3	Filer ID (Ethics Commission 00085309	ı Filers)
4	Date 08/01/2024	 Full name of contributor out-of-state PAC (ID#:_ Gibson, John Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$50.00
_		Lubbock, TX 79407				
8	Principal occu Lawyer	pation / Job title (See Instructions)	9 Employer (See Instructions) GibsonFirm)		
	Date 08/02/2024	Full name of contributor out-of-state PAC (ID#:_Gibson, John Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Lubbock, TX 79407 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Lawyer	pation / coo title (coo metadolono)	GibsonFirm	,		
	Date 09/01/2024	Full name of contributor out-of-state PAC (ID#:_ Gibson, John Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Lubbock, TX 79407				
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions GibsonFirm)		
	Date 09/02/2024	Full name of contributor out-of-state PAC (ID#:_ Gibson, John Contributor address; City; State; Zip Code Lubbock, TX 79407			Amount of Contribution (\$)	\$50.00
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions GibsonFirm)		
	Date 10/01/2024	Full name of contributor out-of-state PAC (ID#:_Gibson, John Contributor address; City; State; Zip Code Lubbock, TX 79407			Amount of Contribution (\$)	\$50.00
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions GibsonFirm)		

	MONET	ARY POLITICAL CONTRIBUTION	Ν	IS		SCHEDULI	■ A1
	The Instruc	ction Guide explains how to complete this t	for	m.	1	Total pages Schedule A1: Sch: 6/31 Rpt: 9/54	
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	Filers)
4	Date 10/02/2024	 Full name of contributor out-of-state PAC (ID#: Gibson, John Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$50.00
8		Lubbock, TX 79407 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#: Gibson, John Contributor address; City; State; Zip Code Lubbock, TX 79407		GibsonFirm	•	Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions GibsonFirm	<u> </u> s)		
	Date 11/02/2024	Full name of contributor out-of-state PAC (ID#: Gibson, John Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$50.00
	Principal occu	Lubbock, TX 79407 pation / Job title (See Instructions)		Employer (See Instructions	 S)		
	Date 12/01/2024	Full name of contributor out-of-state PAC (ID#: Gibson, John Contributor address; City; State; Zip Code Lubbock, TX 79407		GibsonFirm	•	Amount of Contribution (\$)	\$50.00
	Principal occu Lawyer	pation / Job title (See Instructions)		Employer (See Instructions GibsonFirm	5)		
	Date 12/02/2024	Full name of contributor out-of-state PAC (ID#:_Gibson, John Contributor address; City; State; Zip Code Lubbock, TX 79407				Amount of Contribution (\$)	\$50.00
	Principal occu Lawyer	pation / Job title (See Instructions)		Employer (See Instructions GibsonFirm	<u>s)</u>		
			•				

	MONEI	ARY POLITICAL (CONTRIBUTION	NS		SCHEDULI	E A1
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 7/31 Rpt: 10/54	
2	FILER NAME The 134 Poli	itical Action Committee			3	Filer ID (Ethics Commission 00085309	ı Filers)
4	Date 07/08/2024	5 Full name of contributorGoldstein, Bridgette6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$10.00
8	Principal occu Business An	Mineral Wells, TX 76067 pation / Job title (See Instructions alyst	s) g	Employer (See Instructions Self Employed	5)		
	Date 08/08/2024	Full name of contributor Goldstein, Bridgette Contributor address; City; S	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$10.00
	Principal occu Business An	Mineral Wells, TX 76067 pation / Job title (See Instructions alyst	5)	Employer (See Instructions Self Employed	<u> </u> s)		
	Date 09/10/2024	Full name of contributor Goldstein, Bridgette Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Business An	Mineral Wells, TX 76067 pation / Job title (See Instructions alyst	s)	Employer (See Instructions Self Employed	<u> </u> s)		
Date 10/08/2024		Full name of contributor Goldstein, Bridgette Contributor address; City; S Mineral Wells, TX 76067	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Business An	pation / Job title (See Instructions	s)	Employer (See Instructions Self Employed	<u> </u>		
	Date 07/09/2024	Full name of contributor Gordon, Daniel Contributor address; City; S Washington, TX 20009	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu Not employe	pation / Job title (See Instructions ed	s)	Employer (See Instructions Not employed	s)		
							

	MONEI	ARY POLITICAL (CONTRIBUTION	NS		SCHEDULI	A1
	The Instru	ction Guide explains hov	v to complete this fo	rm.	1	Total pages Schedule A1: Sch: 8/31 Rpt: 11/54	
2	FILER NAME The 134 Poli	itical Action Committee			3	Filer ID (Ethics Commission 00085309	ı Filers)
4	Date 08/09/2024	5 Full name of contributor Gordon, Daniel6 Contributor address; City; S	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$10.00
8	Principal occu Not employe	Washington, TX 20009 pation / Job title (See Instructionsed	s) 9	Employer (See Instructions Not employed	5)		
	Date 09/09/2024	Full name of contributor Gordon, Daniel Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code)		Amount of Contribution (\$)	\$10.00
	Principal occu Not employe	Washington, TX 20009 pation / Job title (See Instructions d	5)	Employer (See Instructions Not employed	<u> </u> s)		
	Date 10/09/2024	Full name of contributor Gordon, Daniel Contributor address; City; S	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$10.00
	Dringing aggr	Washington, TX 20009 pation / Job title (See Instructions		Employer (See Instructions	<u>''</u>		
	Not employe	,	5)	Not employed	·)		
	Date 07/03/2024	Full name of contributor HEROD, BRIAN Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	HOUSTON, TX 77252 pation / Job title (See Instructions	5)	Employer (See Instructions University of Texas Hou		n	
	Date 08/03/2024	Full name of contributor HEROD, BRIAN Contributor address; City; S HOUSTON, TX 77252	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu assistant dire	pation / Job title (See Instructions	s)	Employer (See Instructions University of Texas Hou		n	

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 9/31 Rpt: 12/54	
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	Filers)
4	Date 09/03/2024	HEROD, BRIAN	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$50.00
_	5	HOUSTON, TX 77252		5 1 (0 1 i ii	<u></u>		
8	assistant dire	pation / Job title (See Instructions) ector		Employer (See Instructions University of Texas Hou		n	
	Date 10/03/2024	HEROD, BRIAN Contributor address; City; State; 2)		Amount of Contribution (\$)	\$50.00
	Principal occu	HOUSTON, TX 77252 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	assistant dire			University of Texas Hou		n	
	Date 11/03/2024	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
		HOUSTON, TX 77252					
	Principal occup assistant dire	pation / Job title (See Instructions) ector		Employer (See Instructions) University of Texas Houston			
	Date 12/03/2024	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occup assistant dire	pation / Job title (See Instructions)		Employer (See Instructions University of Texas Hou		n	
	Date 07/21/2024	Full name of contributor Hester, Michael Contributor address; City; State; 2	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occup security	pation / Job title (See Instructions)		Employer (See Instructions SecureOne	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	Ν	IS		SCHEDULE	A1
	The Instruc	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 10/31 Rpt: 13/54	
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	-ilers)
4	Date 08/21/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$5.00
0	Dringing occur	MINERAL WELLS, TX 76067	_	Employer (See Instructions			
8	security	pation / Job title (See Instructions)	9	Employer (See Instructions SecureOne	5)		
	Date 09/21/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.00
	Principal occu	MINERAL WELLS, TX 76067 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	security			SecureOne			
	Date 10/21/2024	Full name of contributor				Amount of Contribution (\$)	\$5.00
		MINERAL WELLS, TX 76067					
	Principal occu security	pation / Job title (See Instructions)		Employer (See Instructions SecureOne	5)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ Hester, Michael Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067)		Amount of Contribution (\$)	\$5.00
	Principal occu security	pation / Job title (See Instructions)		Employer (See Instructions SecureOne	5)		
	Date 12/21/2024	Full name of contributor out-of-state PAC (ID#:_ Hester, Michael Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067)		Amount of Contribution (\$)	\$5.00
	Principal occursecurity	pation / Job title (See Instructions)		Employer (See Instructions SecureOne	5)		

	MONEI	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orn	n.	1	Total pages Schedule A1: Sch: 11/31 Rpt: 14/54	
2	FILER NAME	itical Action Committee				3	Filer ID (Ethics Commission 00085309	n Filers)
_						_		
4	Date 07/25/2024	5 Full name of contributorHogg, Jon Mark6 Contributor address; City; S	out-of-state PAC (ID#:_)	,	Amount of Contribution (\$)	\$500.00
		San Angelo, TX 76901						
8	Principal occu Lawyer	pation / Job title (See Instructions	5)	9	Employer (See Instructions Self-Employed	5)		
	Date 08/25/2024	Full name of contributor Hogg, Jon Mark Contributor address; City; S	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$500.00
		San Angelo, TX 76901						
	Principal occu Lawyer	pation / Job title (See Instructions	s) 		Employer (See Instructions Self-Employed	5)		
	Date 09/25/2024	Full name of contributor Hogg, Jon Mark Contributor address; City; S	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$500.00
		San Angelo, TX 76901						
	·	pation / Job title (See Instructions	s)		Employer (See Instructions)		
	Lawyer				Self-Employed			
	Date 10/25/2024	Full name of contributor Hogg, Jon Mark Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$500.00
		San Angelo, TX 76901						
	Principal occu Lawyer	pation / Job title (See Instructions	s)		Employer (See Instructions Self-Employed	5)		
	Date 11/25/2024	Full name of contributor Hogg, Jon Mark	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$500.00
		Contributor address; City; S San Angelo, TX 76901	tate; Zip Code					
	Principal occu Lawyer	pation / Job title (See Instructions	s)		Employer (See Instructions Self-Employed)		

	MONET	ARY POLITICAL CONTRIBUTION	NC	IS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 12/31 Rpt: 15/54	
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	n Filers)
4	Date 12/25/2024	 Full name of contributor out-of-state PAC (ID#: Hogg, Jon Mark Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$500.00
		San Angelo, TX 76901					
8	Principal occu Lawyer	pation / Job title (See Instructions)	9	Employer (See Instructions Self-Employed	5)		
	Date 07/11/2024	Full name of contributor out-of-state PAC (ID#:_Kinsey, Alice Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
	Principal occu	Dallas, TX 75203 pation / Job title (See Instructions)	1	Employer (See Instructions	·/-		
	Not Employe			Not Employed	·)		
	Date 08/11/2024	Full name of contributor out-of-state PAC (ID#: Kinsey, Alice Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$50.00
		Dallas, TX 75203					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 09/15/2024	Full name of contributor out-of-state PAC (ID#:_Kinsey, Alice Contributor address; City; State; Zip Code Dallas, TX 75203)	•	Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u> 5)		
	Date 10/17/2024	Full name of contributor out-of-state PAC (ID#: Kinsey, Alice Contributor address; City; State; Zip Code Dallas, TX 75203)	•	Amount of Contribution (\$)	\$75.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		
			•				

	MONEI	ARY POLITICAL (CONTRIBUTION	NS		SCHEDULI	A1
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 13/31 Rpt: 16/54	
2	FILER NAME The 134 Poli	itical Action Committee			3	Filer ID (Ethics Commission 00085309	Filers)
4	Date 11/11/2024	5 Full name of contributor Kinsey, Alice6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$75.00
8	Principal occu Not Employe		9	Employer (See Instructions Not Employed	s)		
	Date 12/11/2024	Full name of contributor Kinsey, Alice Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$75.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	<u> </u> S)		
	Date 07/09/2024	Full name of contributor Lackey, Cynthia Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu	San Angelo, TX 76901 pation / Job title (See Instructions	s)	Employer (See Instructions	S)		
	Executive Di	rector		San Angelo Early Childl	hoc	od Center	
	Date 08/09/2024	Full name of contributor Lackey, Cynthia Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu	San Angelo, TX 76901 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> s)		
	Executive Di	rector		San Angelo Early Childl	hoc	od Center	
	Date 09/09/2024	Full name of contributor Lackey, Cynthia Contributor address; City; St San Angelo, TX 76901	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Executive Di	pation / Job title (See Instructions rector	s)	Employer (See Instructions San Angelo Early Childl		od Center	

	MONEI	ARY POLITICAL CON	NIRIBUTION	S	SCHEDULE A	\1
	The Instruc	ction Guide explains how to c	complete this form	n.	1 Total pages Schedule A1: Sch: 14/31 Rpt: 17/54	
2	FILER NAME The 134 Poli	itical Action Committee			3 Filer ID (Ethics Commission File 00085309	rs)
4	Date 10/09/2024	5 Full name of contributor o Lackey, Cynthia6 Contributor address; City; State; Z	ut-of-state PAC (ID#:		7 Amount of Contribution (\$) \$.	25.00
8	Principal occu	San Angelo, TX 76901 pation / Job title (See Instructions)	9	Employer (See Instructions	5)	
	Executive Di	rector		San Angelo Early Childh	hood Center	
	Date 11/09/2024	Full name of contributor o care o car	ut-of-state PAC (ID#:		Amount of Contribution (\$)	25.00
		San Angelo, TX 76901	<u>, </u>			
		pation / Job title (See Instructions)		Employer (See Instructions		
	Executive Di			San Angelo Early Childh		
	Date 12/09/2024	Full name of contributor	ut-of-state PAC (ID#:		Amount of Contribution (\$) \$.	25.00
		San Angelo, TX 76901				
	Principal occu Executive Di	pation / Job title (See Instructions) rector		Employer (See Instructions San Angelo Early Childh		
	Date 07/09/2024	Full name of contributor o Link, Jacob Contributor address; City; State; Z	ut-of-state PAC (ID#:		Amount of Contribution (\$) \$	10.00
	Principal occu Associate	pation / Job title (See Instructions)		Employer (See Instructions Laurel Strategies	S)	
	Date 08/09/2024	Full name of contributor o c link, Jacob Contributor address; City; State; Z Hereford, TX 79045	ut-of-state PAC (ID#:		Amount of Contribution (\$) \$	10.00
	Principal occu Associate	pation / Job title (See Instructions)		Employer (See Instructions Laurel Strategies	5)	

	MONEI	ARY POLITICAL CON	HRIBUTION	S		SCHEDULI	A1
	The Instru	ction Guide explains how to c	omplete this forr	n.	1	Total pages Schedule A1: Sch: 15/31 Rpt: 18/54	
2	FILER NAME The 134 Poli	itical Action Committee			3	Filer ID (Ethics Commission 00085309	Filers)
4	Date 09/09/2024	5 Full name of contributor or Link, Jacob6 Contributor address; City; State; Z	ut-of-state PAC (ID#: ip Code)	7	Amount of Contribution (\$)	\$10.00
8	Principal occu Associate	Hereford, TX 79045 pation / Job title (See Instructions)		Employer (See Instructions Laurel Strategies	;)		
	Date 10/09/2024	Full name of contributor	ut-of-state PAC (ID#: ip Code)		Amount of Contribution (\$)	\$10.00
	Principal occu Associate	Hereford, TX 79045 pation / Job title (See Instructions)		Employer (See Instructions Laurel Strategies	i)		
	Date 11/09/2024	Full name of contributor on Link, Jacob Contributor address; City; State; Z	ut-of-state PAC (ID#: ip Code			Amount of Contribution (\$)	\$10.00
		Hereford, TX 79045					
	Associate	pation / Job title (See Instructions)		Employer (See Instructions Laurel Strategies	5)		
	Date 12/09/2024	Full name of contributor on Link, Jacob Contributor address; City; State; Z Hereford, TX 79045	ut-of-state PAC (ID#: ip Code			Amount of Contribution (\$)	\$10.00
	Principal occu Associate	pation / Job title (See Instructions)		Employer (See Instructions Laurel Strategies	<u>(</u>		
	Date 07/02/2024	Full name of contributor of Mosley, Brooklynne Contributor address; City; State; Z	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions) Campaign Director		Employer (See Instructions Texas Democratic Party			

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this forn	1.	1	Total pages Schedule A1: Sch: 16/31 Rpt: 19/54	
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	n Filers)
4	Date 07/23/2024	Nevarez, Poncho	out-of-state PAC (ID#: Zip Code		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Eagle Pass, TX 78852 pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 08/23/2024	Full name of contributor	out-of-state PAC (ID#:	Nevarez Law Group PC		Amount of Contribution (\$)	\$100.00
	Principal occu Attorney	Eagle Pass, TX 78852 pation / Job title (See Instructions)		Employer (See Instructions Nevarez Law Group PC)		
	Date 09/23/2024	Full name of contributor Nevarez, Poncho Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu	Eagle Pass, TX 78852 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 10/23/2024	Full name of contributor Nevarez, Poncho Contributor address; City; State;	out-of-state PAC (ID#:	Nevarez Law Group PC		Amount of Contribution (\$)	\$100.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Nevarez Law Group PC)		
	Date 11/23/2024	Full name of contributor Nevarez, Poncho Contributor address; City; State; 2 Eagle Pass, TX 78852	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Nevarez Law Group PC)		
			,				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/31 Rpt: 20/54	
2	FILER NAME The 134 Poli	itical Action Committee		3	Filer ID (Ethics Commission 00085309	n Filers)
4	Date 07/16/2024	5 Full name of contributor out-of-state PAC (ID#:_ Parker Bright, Chantel 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$134.00
_	Deinsinal	Dallas, TX 75229				
8	Principal occu Design Cons	pation / Job title (See Instructions) sultant	9 Employer (See Instructions) Parker Bright LLC)		
	Date 07/17/2024	Full name of contributor			Amount of Contribution (\$)	\$10.00
	Dringinal occu	New Waverly, TX 77358 upation / Job title (See Instructions)	Employer (See Instructions			
	Faa	pation / Job title (See Instructions)	Atcs	<u>, </u>		
	Date 08/17/2024	Full name of contributor out-of-state PAC (ID#:_ Powers, Sheryl Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
		New Waverly, TX 77358				
	Principal occu Faa	pation / Job title (See Instructions)	Employer (See Instructions Atcs)		
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#:_ Powers, Sheryl Contributor address; City; State; Zip Code New Waverly, TX 77358)		Amount of Contribution (\$)	\$10.00
	Principal occu Faa	pation / Job title (See Instructions)	Employer (See Instructions Atcs)		
	Date 10/17/2024	Full name of contributor out-of-state PAC (ID#:_ Powers, Sheryl Contributor address; City; State; Zip Code New Waverly, TX 77358			Amount of Contribution (\$)	\$10.00
	Principal occu Faa	pation / Job title (See Instructions)	Employer (See Instructions Atcs)		

	MONET	ARY POLITICAL CONTRIBUTION	ΝC	IS		SCHEDULI	■ A1
	The Instruc	ction Guide explains how to complete this t	for	m.	1	Total pages Schedule A1: Sch: 18/31 Rpt: 21/54	
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	ı Filers)
4	Date 11/17/2024	 Full name of contributor out-of-state PAC (ID#: Powers, Sheryl Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$10.00
8	Principal occu	New Waverly, TX 77358 pation / Job title (See Instructions)	T _a	Employer (See Instructions	<u>,,</u>		
0	Faa	oauon7 Job tille (See Instructions)	"	Atcs	·)		
	Date 12/17/2024	Full name of contributor out-of-state PAC (ID#: Powers, Sheryl Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
		New Waverly, TX 77358	_				
	Principal occu Faa	pation / Job title (See Instructions)		Employer (See Instructions Atcs	S)		
	Date 07/01/2024	Full name of contributor out-of-state PAC (ID#:_Seifert, Saundra Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$10.00
		San Angelo, TX 76901					
	Principal occu Pediatrician	pation / Job title (See Instructions)		Employer (See Instructions Shannon Clinic	5)		
	Date 08/01/2024	Full name of contributor out-of-state PAC (ID#:_Seifert, Saundra Contributor address; City; State; Zip Code San Angelo, TX 76901)		Amount of Contribution (\$)	\$10.00
	Principal occu Pediatrician	pation / Job title (See Instructions)		Employer (See Instructions Shannon Clinic	<u> </u> 5)		
	Date 09/01/2024	Full name of contributor out-of-state PAC (ID#: Seifert, Saundra Contributor address; City; State; Zip Code San Angelo, TX 76901)		Amount of Contribution (\$)	\$10.00
	Principal occu Pediatrician	pation / Job title (See Instructions)		Employer (See Instructions Shannon Clinic	5)		
			<u> </u>				

	MONET	ARY POLITICAL CONTRIBUTIO	N	IS		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 19/31 Rpt: 22/54	
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	n Filers)
4	Date 10/01/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$10.00
_		San Angelo, TX 76901	_				
8	Principal occu Pediatrician	pation / Job title (See Instructions)	9	Employer (See Instructions Shannon Clinic	5)		
	Date 11/01/2024	Full name of contributor				Amount of Contribution (\$)	\$10.00
	Principal occu	San Angelo, TX 76901 pation / Job title (See Instructions)		Employer (See Instructions	رد 		
	Pediatrician	pation / Job title (Jee matactions)		Shannon Clinic	,,		
	Date 12/01/2024	Full name of contributor out-of-state PAC (ID#:_ Seifert, Saundra Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
		San Angelo, TX 76901					
	Principal occu Pediatrician	pation / Job title (See Instructions)		Employer (See Instructions Shannon Clinic	s)		
	Date 07/04/2024	Full name of contributor out-of-state PAC (ID#:_Slone, Jeri Contributor address; City; State; Zip Code SAN ANGELO, TX 76903				Amount of Contribution (\$)	\$100.00
	Principal occu Social Service	pation / Job title (See Instructions)		Employer (See Instructions Bluebonnet Homes	<u>l</u> s)		
	Date 08/04/2024	Full name of contributor out-of-state PAC (ID#:_Slone, Jeri Contributor address; City; State; Zip Code SAN ANGELO, TX 76903				Amount of Contribution (\$)	\$100.00
	Principal occu Social Service	pation / Job title (See Instructions)		Employer (See Instructions Bluebonnet Homes	s)		

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to con	nplete this forr	n.	1	Total pages Schedule A1: Sch: 20/31 Rpt: 23/54	
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	n Filers)
4	Date 09/04/2024	 Full name of contributor out-of Slone, Jeri Contributor address; City; State; Zip C 			7	Amount of Contribution (\$)	\$100.00
8	Principal occu	SAN ANGELO, TX 76903 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
	Social Service			Bluebonnet Homes	,		
	Date 07/22/2024	Stewart, Susan Contributor address; City; State; Zip C	-state PAC (ID#:)	•	Amount of Contribution (\$)	\$30.00
	Dringinal occu	Pflugerville, TX 78660 pation / Job title (See Instructions)		Employer (See Instructions	·)		
	Not Employe			Not Employed	P)		
	Date 08/22/2024	Full name of contributor out-of Stewart, Susan Contributor address; City; State; Zip C	-state PAC (ID#:)		Amount of Contribution (\$)	\$30.00
		Pflugerville, TX 78660					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		
	Date 09/22/2024	Stewart, Susan	-state PAC (ID#:		•	Amount of Contribution (\$)	\$30.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 10/22/2024	Full name of contributor out-of Stewart, Susan Contributor address; City; State; Zip C	-state PAC (ID#:)	•	Amount of Contribution (\$)	\$30.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
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	MONET	ARY POLITICAL CONTRIB	UTION	IS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 21/31 Rpt: 24/54	
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	ı Filers)
4	Date 11/22/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$30.00
_	Deignaignal	Pflugerville, TX 78660	lo lo	Franksian (Cookastustian			
8	Not Employe	pation / Job title (See Instructions) ed	9	Employer (See Instructions Not Employed	5)		
	Date 12/22/2024	Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$30.00
	Principal occu	Pflugerville, TX 78660 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Not Employe			Not Employed	,		
	Date 07/04/2024	Full name of contributor out-of-state Pastribling, Shelly Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$25.00
		San angelo, TX 76904					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 07/23/2024	Full name of contributor out-of-state Pastribling, Shelly Contributor address; City; State; Zip Code San angelo, TX 76904)	•	Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 08/04/2024	Full name of contributor out-of-state Production out-of-state Production out-of-state Production of Stribling, Shelly Contributor address; City; State; Zip Code San angelo, TX 76904)		Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
			l				

	MONET	ARY POLITICAL CONTR	IBUTION	S		SCHEDULI	■ A1
	The Instruc	ction Guide explains how to comp	lete this forr	n.	1	Total pages Schedule A1: Sch: 22/31 Rpt: 25/54	
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	ı Filers)
4	Date 08/23/2024	Stribling, Shelly	ate PAC (ID#:		7	Amount of Contribution (\$)	\$25.00
8	Principal occur	San angelo, TX 76904 pation / Job title (See Instructions)	9	Employer (See Instructions	;) 		
	Not Employe			Not Employed	,		
	Date 09/04/2024	Stribling, Shelly				Amount of Contribution (\$)	\$25.00
		San angelo, TX 76904			<u> </u>		
	Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		
	Date 09/23/2024	Full name of contributor out-of-state Stribling, Shelly Contributor address; City; State; Zip Cod	ate PAC (ID#:			Amount of Contribution (\$)	\$25.00
		San angelo, TX 76904					
	Principal occu Not Employe	pation / Job title (See Instructions) rd		Employer (See Instructions Not Employed	5)		
	Date 10/04/2024	Stribling, Shelly				Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 10/23/2024	Stribling, Shelly				Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		
			,				

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE	_E A1	
	The Instruc	ction Guide explains how to co	mplete this form	n.	1	Total pages Schedule A1: Sch: 23/31 Rpt: 26/54		
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	ı Filers)	
4	Date 11/04/2024	11/04/2024 Stribling, Shelly 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00		
8	Dringing aggr	San angelo, TX 76904	lo.	Employer (See Instructions				
•	Not Employe	pation / Job title (See Instructions) d	9	Not Employed	')			
	Date 11/23/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-)		Amount of Contribution (\$)	\$25.00	
		San angelo, TX 76904		- 100				
	Principal occupation / Job title (See Instructions) Not Employed Not Employed Not Employed		5)					
	Date 12/04/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00	
		San angelo, TX 76904						
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	i)			
	Date 12/23/2024	Stribling, Shelly				Amount of Contribution (\$)	\$25.00	
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)			
	Date 07/08/2024	Stuart, Guy	of-state PAC (ID#:			Amount of Contribution (\$)	\$20.00	
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed)			
			I					

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULI	SCHEDULE A1	
	The Instruc	ction Guide explains how to comple	ete this for	n.	1	Total pages Schedule A1: Sch: 24/31 Rpt: 27/54		
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	r Filers)	
4	Date 08/08/2024	08/08/2024 Stuart, Guy 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$20.00		
8	Principal occur	Burnet, TX 78611 pation / Job title (See Instructions)	9	Employer (See Instructions	<u>;)</u>			
	Not Employe			Not Employed	-,			
	Date 09/08/2024	Stuart, Guy)	•	Amount of Contribution (\$)	\$20.00	
		Burnet, TX 78611	•					
	Principal occup Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)			
	Date 10/08/2024	Stuart, Guy)		Amount of Contribution (\$)	\$20.00	
	Delevie et e e e e	Burnet, TX 78611		Faralassa (Osa lastrustisas	_			
	Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)			
	Date 11/08/2024	Stuart, Guy Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$20.00	
	Principal occu Not Employe	Burnet, TX 78611 pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u> s)			
	Date 12/08/2024	Stuart, Guy)		Amount of Contribution (\$)	\$20.00	
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)			
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	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE	SCHEDULE A1	
	The Instru	ction Guide explains how to con	nplete this form	m.	1	Total pages Schedule A1: Sch: 25/31 Rpt: 28/54		
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	Filers)	
4	Date 07/16/2024	Taylor, Heidi	f-state PAC (ID#:)	7	Amount of Contribution (\$)	\$10.00	
8	Principal occu	Canyon, TX 79015 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>			
	R.N. And Pro			Texas Wesleyan u.	,			
	Date 08/16/2024	Full name of contributor out-of Taylor, Heidi Contributor address; City; State; Zip C				Amount of Contribution (\$)	\$10.00	
		Canyon, TX 79015						
		pation / Job title (See Instructions)		Employer (See Instructions	5)			
	R.N. And Pro			Texas Wesleyan u.	_			
	Date 09/16/2024	Full name of contributor out-of Taylor, Heidi Contributor address; City; State; Zip C	f-state PAC (ID#:			Amount of Contribution (\$)	\$10.00	
		Canyon, TX 79015						
	Principal occu R.N. And Pro	pation / Job title (See Instructions) ofessor		Employer (See Instructions Texas Wesleyan u.	5)			
	Date 10/16/2024	Taylor, Heidi Contributor address; City; State; Zip C)		Amount of Contribution (\$)	\$10.00	
	Principal occu R.N. And Pro	canyon, TX 79015 pation / Job title (See Instructions) ofessor		Employer (See Instructions Texas Wesleyan u.	<u> </u> 5)			
	Date 11/16/2024	Taylor, Heidi Contributor address; City; State; Zip C	f-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00	
	Dain sin 1	Canyon, TX 79015	ı	Formula van (O. 1. i. i.	<u></u>			
	Principal occu R.N. And Pro	pation / Job title (See Instructions) ofessor		Employer (See Instructions Texas Wesleyan u.	5)			
			·					

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE	SCHEDULE A1	
	The Instruc	ction Guide explains how	to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 26/31 Rpt: 29/54		
2	FILER NAME The 134 Poli	itical Action Committee				3	Filer ID (Ethics Commission 00085309	Filers)	
4	Date 12/16/2024	1.2/16/2024 Taylor, Heidi 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$10.00			
8	Principal occu	Canyon, TX 79015 pation / Job title (See Instructions	s)	9	Employer (See Instructions	 s)			
	R.N. And Professor Texas Wesleyan u.								
	Date 07/16/2024	Full name of contributor Thompson, Suzann Contributor address; City; S)		Amount of Contribution (\$)	\$25.00	
	Principal occu	Dubin, TX 76446 pation / Job title (See Instructions	3)		Employer (See Instructions	;) 			
	artist and writer self		,						
	Date 08/16/2024	Full name of contributor Thompson, Suzann Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00	
		Dubin, TX 76446							
	Principal occu artist and wri	pation / Job title (See Instructions iter	5)		Employer (See Instructions self	5)			
	Date 09/16/2024	Full name of contributor Thompson, Suzann Contributor address; City; S Dubin, TX 76446)		Amount of Contribution (\$)	\$25.00	
	Principal occu artist and wri	pation / Job title (See Instructions iter	5)		Employer (See Instructions self	5)			
	Date 10/16/2024	Full name of contributor Thompson, Suzann Contributor address; City; S Dubin, TX 76446	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$25.00	
	Principal occu artist and wri	pation / Job title (See Instructions iter	5)		Employer (See Instructions self	s)			
			•						

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE	E A1	
	The Instru	ction Guide explains how	to complete this fo	orı	n.	1	Total pages Schedule A1: Sch: 27/31 Rpt: 30/54	
2	FILER NAME	tical Action Committee				3	Filer ID (Ethics Commission 00085309	Filers)
_						<u> </u>		
4	Date 11/16/2024	5 Full name of contributorThompson, Suzann6 Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	 	Amount of Contribution (\$)	\$25.00
		Dubin, TX 76446						
8	Principal occu artist and wri	pation / Job title (See Instructions iter)	9	Employer (See Instructions self	s)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)	
	12/16/2024	Thompson, Suzann	out or state 1710 (IBM				7 anount of Containation (+)	\$25.00
	12/10/2021		esto: Zin Codo			ł		Ψ20.00
		Contributor address; City; St	ate, zip Code					
		Dubin, TX 76446						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	artist and wri	iter			self			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	07/14/2024	Turknett, Robert	Turknett, Robert				\$15.00	
		Contributor address; City; St	ate; Zip Code			1		
		, ,,	. ,					
		Austin, TX 78723						
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	5)		
	Software Eng	gineer			Microsoft			
	Date	Full name of contributor	out-of-state PAC (ID#:_			Γ	Amount of Contribution (\$)	
	08/14/2024	Turknett, Robert	Out of state 1 Ae (ID#				ranount of Contribution (¢)	\$15.00
	00/14/2024				ł		Ψ10.00	
		Contributor address; City; St	ate, zip Code					
		Austin, TX 78723						
	Principal occu	I pation / Job title (See Instructions	3)		Employer (See Instructions	<u>L</u> S)		
	Software En		,		Microsoft	,		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Г	Amount of Contribution (\$)	
	09/14/2024	Turknett, Robert	Uni-oi-state PAC (ID#				Amount of Contribution (\$)	\$15.00
	03/14/2024					ŀ		Ψ13.00
		Contributor address; City; St	ate; Zip Code					
		Austin, TX 78723						
	Principal occu	pation / Job title (See Instructions	.)		Employer (See Instructions	:) 		
	Software En		7)		Microsoft	"		
	John Marc Elli	gineer			WINGLOSOIL			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDUL	SCHEDULE A1	
	The Instru	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 28/31 Rpt: 31/54		
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	n Filers)	
4	Date 10/14/2024	10/14/2024 Turknett, Robert 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$15.00		
8	Principal occu Software En	Austin, TX 78723 pation / Job title (See Instructions)	9	Employer (See Instructions Microsoft	<u> </u> S)			
	Date 11/14/2024	Full name of contributor out-of-state PA Turknett, Robert				Amount of Contribution (\$)	\$15.00	
	Principal occu Software Eng	pation / Job title (See Instructions) gineer		Employer (See Instructions Microsoft	5)			
	Date 12/14/2024	Full name of contributor out-of-state PA Turknett, Robert Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$15.00	
	Principal occu	Austin, TX 78723 pation / Job title (See Instructions)		Employer (See Instructions	 			
	Software Eng	gineer		Microsoft				
	Date 08/06/2024	Full name of contributor out-of-state PA Wesson, Jan Contributor address; City; State; Zip Code Dripping Springs, TX 78620)		Amount of Contribution (\$)	\$25.00	
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u>I</u> S)			
	Date 09/08/2024	Full name of contributor out-of-state PA White, Stevan Contributor address; City; State; Zip Code San Angelo, TX 76903-8643				Amount of Contribution (\$)	\$100.00	
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE	SCHEDULE A1	
	The Instruc	ction Guide explains how to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 29/31 Rpt: 32/54		
2	FILER NAME The 134 Poli	tical Action Committee			3	Filer ID (Ethics Commission 00085309	Filers)	
4	Date 07/28/2024	07/28/2024 Wilson, Phillip 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$20.00		
8	Principal occup Not Employe	Fredericksburg, TX 78624 pation / Job title (See Instructions) d	9	Employer (See Instructions Not Employed	<u> </u> s)			
	Date 08/30/2024	Full name of contributor out-of-state PAC (ID#:_ Wilson, Phillip Contributor address; City; State; Zip Code Fredericksburg, TX 78624				Amount of Contribution (\$)	\$20.00	
	Principal occup Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u>(</u> 5)			
	Date 10/04/2024	Full name of contributor)	•	Amount of Contribution (\$)	\$20.00	
	Principal occu	Fredericksburg, TX 78624 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)			
	Not Employe Date 10/28/2024	Full name of contributor		Not Employed		Amount of Contribution (\$)	\$20.00	
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)			
	Date 11/28/2024	Full name of contributor out-of-state PAC (ID#:_ Wilson, Phillip Contributor address; City; State; Zip Code Fredericksburg, TX 78624			•	Amount of Contribution (\$)	\$20.00	
	Principal occup Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)			

	MONETARY POLITICAL CONTRIBUTIONS					E A1	
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 30/31 Rpt: 33/54	
2	FILER NAME	itical Action Committee			3	Filer ID (Ethics Commission 00085309	n Filers)
4	11/10/2024 Yarbrough, Michael 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00		
0	Dringing agg	Brooklyn, TX 11217	l _o .	Employer (See Instructions	<u>''</u>		
8	Principal occu Professor	pation / Job title (See Instructions)	9	Employer (See Instructions John Jay College of Crir		al Justice	
	Date 12/10/2024	Full name of contributor Yarbrough, Michael Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$25.00
	Dringinal occu	Brooklyn, TX 11217 upation / Job title (See Instructions)		Employer (See Instructions	·)		
	Professor John Jay College of Crin			al Justice			
	Date 07/11/2024	Full name of contributor Yeager, Jessica Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$200.00
		Manor, TX 78653					
	Principal occu administrativ	pation / Job title (See Instructions) ve assistant		Employer (See Instructions University of Texas at A	•	'n	
	Date 07/28/2024	Full name of contributor conley, judith Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu pharmacist	pation / Job title (See Instructions)		Employer (See Instructions walmart	5)		
	Date 08/28/2024	Full name of contributor conley, judith Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu pharmacist	pation / Job title (See Instructions)		Employer (See Instructions walmart	s)		

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 31/31 Rpt: 34/54
2	FILER NAME The 134 Political Action Committee	3 Filer ID (Ethics Commission Filers) 00085309
4		_) 7 Amount of Contribution (\$) \$25.0
	Georgetown, TX 78628	
8	Principal occupation / Job title (See Instructions) 9 Employer (See Instrument walmart	ctions)
	Date Full name of contributor out-of-state PAC (ID#:	_) Amount of Contribution (\$) \$25.0
	Georgetown, TX 78628	
	Principal occupation / Job title (See Instructions) Employer (See Instru pharmacist walmart	ctions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Co

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

Candidate/Officenolder/Political	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 1/20 Rpt: 35/54	The 134 Political Action Committee 00085309	
4 Date	5 Payee name	
12/16/2024	Bastrop Convention Center	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,000.00	1408 Chesnut Street St B	
Expenditure from corporate funds	Bastrop , TX 78602	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Rental of meeting room	
	Trental of meeting room	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	4
expenditure to benefit C/OI		
		_
Date	Payee name	
11/12/2024	Brown County Democratic Party	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	6 Stonebrook Ct	
Expenditure from corporate funds	Brownwood , TX 76801	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Gift/Awards/Memorials Expense	
EXI ENDITORE	Check if Austin, TX, officeholder living expense	
	Billboard Grant	
		_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
10/08/2024	Coalition of Democratic Allies	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	100 Watercourse Way	
Expenditure from corporate funds	Bastrop , TX 78602	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Billboard Grant	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	1	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ising Expense Event Expense Loan Repayment/Reimbu

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

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)

Credit Card Payment	The Instruction Guide explains how to co	omplete t	his form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 2/20 Rpt: 36/54	The 134 Political Action Committee		00085309	
4 Date	5 Payee name		•	
09/03/2024	Courtyard by Marriott			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$629.12	724 Polk Street			
Expenditure from corporate funds	Amarillo , TX 79101			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	scription	
OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Compl	
			Check if Austin, TX, officeholder living e ental of room for fundraiser	expense
		INC	ental of footh for fundraiser	
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ıaht	Office hel	d
expenditure to benefit C/O		agrit	Office field	u
Date	Payeo namo			
07/01/2024	Payee name First Financial Bank			
		ndo.		
Amount (\$) \$5.00	Payee address; City; State; Zip Co 400 Pine Street	Jue		
\$5.00	400 Fille Stieet			
Expenditure from	Abliana TV 70601			
corporate funds	Abliene, TX 79601	I		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)		Scription Check if travel outside of Texas. Compl	oto Schodulo T
EXPENDITURE	Accounting/Banking		Check if Austin, TX, officeholder living e	
			onthly Bank statement fee	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office hel	d
expenditure to benefit C/OI	1			
Date	Payee name			
07/15/2024	First Financial Bank			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$25.00	400 Pine Street			
Expenditure from corporate funds	Abliene, TX 79601			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	scription	
OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Compl	
EXPENDITORE			Check if Austin, TX, officeholder living e	
		MIC	onthly Bank Account Fee fo	r positive pay
Complete ONLY if direct	Candidate/Officeholder name Office according	laht.	Office hel	d
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	agrit	Office nei	u

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenolder/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/20 Rpt: 37/54	The 134 Political Action Committee 00085309
4 Date	5 Payee name
08/01/2024	First Financial Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5.00	400 Pine Street
Expenditure from corporate funds	Abliene, TX 79601
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Monthly Bank Statement Fee
	monany Bank Stationish 1 66
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date	Payee name First Financial Bank
08/15/2024	
Amount (\$)	Payee address; City; State; Zip Code
\$25.00	400 Pine Street
Expenditure from	
corporate funds	Abliene, TX 79601
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Monthly Banking Account Maintenance Fee
Commission ONII V if dispose	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
09/03/2024	First Financial Bank
Amount (\$)	Payee address; City; State; Zip Code
\$5.00	400 Pine Street
- Evpanditura from	
Expenditure from corporate funds	Abliene, TX 79601
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Bank Fee for account
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientiale to beliefit 6/01	

SCHEDULE F1

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

Event Expense Lo
Fees Of
Food/Beverage Expense Pc
Gift/Awards/Memorials Expense Pr
Logal Sonicos Services Servi

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1. Total pages Cabadula F4:	
1 Total pages Schedule F1:	
Sch: 4/20 Rpt: 38/54	The 134 Political Action Committee 00085309
4 Date	5 Payee name
09/16/2024	First Financial Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25.00	400 Pine Street
420.00	
Expenditure from	Abliana TV 70001
corporate funds	Abliene, TX 79601
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Monthly Banking Account Services
	Monthly Banking Account Services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitie to beliefft C/OI	•
Date	Payee name
10/01/2024	First Financial Bank
Amount (\$)	Payee address; City; State; Zip Code
\$5.00	400 Pine Street
φ3.00	400 I life Succe
Expenditure from	
corporate funds	Abliene, TX 79601
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Monthly Bank Statement Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiditure to beriefit C/O	
Date	Payee name
10/15/2024	First Financial Bank
Amount (\$)	Payee address; City; State; Zip Code
\$25.00	400 Pine Street
Φ25.00	400 Fine Succt
Expenditure from	
corporate funds	Abliene, TX 79601
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
LAI LINDITURE	Check if Austin, TX, officeholder living expense
	Monthly Bank Account Services Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Credit Card Payment	The Instruction Guide explains how to con	mplete	e this form.		
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 5/20 Rpt: 39/54	The 134 Political Action Committee			00085309	
4 Date	5 Payee name		'		
10/30/2024	First Financial Bank				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$32.59	400 Pine Street				
Expenditure from corporate funds	Abliene, TX 79601				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) D	Description		
OF EXPENDITURE	Accounting/Banking		Check if travel outsid		
LXFLINDITORL		[Check if Austin, TX,		g expense
			Purchase of che	CKS	
9 Complete ONLY if direct	Candidate/Officeholder name Office sour	aht		Office he	nid
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		igiit		Office fie	aiu
Data					
Date	Payee name First Financial Bank				
11/01/2024					
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$5.00	400 Pine Street				
Expenditure from					
corporate funds	Abliene, TX 79601				
PURPOSE OF	,	(b) D	Description		
EXPENDITURE	Accounting/Banking	l ⊦	Check if travel outsion Check if Austin, TX,		
		l L	Monthly Fee for		
			•		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ı <u> </u>		Office he	eld
expenditure to benefit C/O	1				
Date	Payee name				
11/15/2024	First Financial Bank				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$29.00	400 Pine Street				
Expenditure from corporate funds	Abliene, TX 79601				
PURPOSE		(b) D	Description		
OF	Accounting/Banking	(», г Г	Check if travel outside	de of Texas. Com	plete Schedule T.
EXPENDITURE			Check if Austin, TX,		
		l N	Monthly Fee ban	nk account s	ervices
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight		Office he	eld
3.42					

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

Credit Card Layment	The Instruction Guide explains how to co	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAME	3	B Filer ID	(Ethics Commission Filers)
Sch: 6/20 Rpt: 40/54	The 134 Political Action Committee		00085309	
4 Date	5 Payee name			
11/27/2024	First Financial Bank			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$17.04	400 Pine Street			
Expenditure from				
corporate funds	Abliene, TX 79601			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees	=	itside of Texas. Comp	
		Monthly Fee fo	rx, officeholder living or video confer	
			1 VIGOO 55	01100 001 11000
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office he	iq
expenditure to benefit C/OI		9		
Date	Payee name			
12/02/2024	First Financial Bank			
Amount (\$)	Payee address; City; State; Zip Co			
\$5.00	400 Pine Street	de		
+4	400 1 110 50 500			
Expenditure from corporate funds	Abliene, TX 79601			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Accounting/Banking	—	itside of Texas. Comp FX, officeholder living	
		Monthly Fee fo		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office he	eld
expenditure to benefit C/OI	4			
Date	Payee name			
12/16/2024	First Financial Bank			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$25.00	400 Pine Street			
Expenditure from corporate funds	Abliene, TX 79601			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Accounting/Banking	Check if travel out	ıtside of Texas. Com	•
EXPENDITORE		ш	TX, officeholder living	•
		Monthly Fee fo	ir bank accour	it services
Complete ONLY if direct	Office on		Office he	1-1
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	gnt	Office he	ЯQ
•				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/20 Rpt: 41/54	The 134 Political Action Committee 00085309
4 Date	5 Payee name
11/08/2024	Gillespie County Democratic Party
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	701 E San Antonio
Expenditure from corporate funds	Fredericksburg, TX 78624
	-
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taylor Camplete Schedule T
EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Billboard Grant
	Billiboard Grant
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/01/2024	Google
Amount (\$)	Payee address; City; State; Zip Code
\$46.05	1600 Ampitheathre Parkway
4.0.00	2000 / m.p.m.oaa.mo
Expenditure from	
corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
LAFENDITORE	Check if Austin, TX, officeholder living expense
	Google Account and online storage for google drive
	documents
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Data	Paras name
Date	Payee name
08/01/2024	Google
Amount (\$)	Payee address; City; State; Zip Code
\$46.05	1600 Ampitheathre Parkway
Expenditure from corporate funds	Mountain View, CA 94043
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Monthly Fee to maintain google services
	Monthly Fee to maintain google services
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/OI	<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wa The Instruction Guide explains how to con	ages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 8/20 Rpt: 42/54	The 134 Political Action Committee	00085309
4 Date	5 Payee name	
09/05/2024	Google	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de
\$46.05	1600 Ampitheathre Parkway	
Expenditure from corporate funds	Mountain View, CA 94043	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Monthly Fee for google accounts
		Monthly Fee for google accounts
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght Office held
Date	Payee name	
10/01/2024	Google	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$46.05	1600 Ampitheathre Parkway	
	,	
Expenditure from corporate funds	Mountain View, CA 94043	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
_/		Check if Austin, TX, officeholder living expense
		Monthly Fee to maintain google accounts
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght Office held
Date	Payee name	
11/01/2024	Google	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$46.05	1600 Ampitheathre Parkway	
Ψ+0.03	1000 Ampliticatifie Farkway	
Expenditure from corporate funds	Mountain View, CA 94043	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
LAI LINDITURE		Check if Austin, TX, officeholder living expense
		Monthly Fee for google accounts
Complete ONLY if direct	Candidate/Officeholder name Office soug	ght Office held
expenditure to benefit C/OI	7	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total marian Cabadida F1.	2 Files ID (Ethics Commission Files)
1 Total pages Schedule F1: Sch: 9/20 Rpt: 43/54	2 FILER NAME The 134 Political Action Committee 3 Filer ID (Ethics Commission Filers) 00085309
4 Date	5 Payee name
12/02/2024	Google
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$46.05	1600 Ampitheathre Parkway
Expenditure from	Mountain View, CA 04042
corporate funds	Mountain View, CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Monthly Fee for google accounts
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/25/2024	Kendall County Democratic Party
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	216 E. Blanco
Expenditure from corporate funds	Boerne, TX 78006
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITUE	Gift/Awards/Memorials Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Billboard Grant
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to beliefit C/Oi	1
Date	Payee name
08/08/2024	L2
00/00/2024	
Amount (\$)	Payee address; City; State; Zip Code
\$352.13	18912 North Creek Parkway Bldg. 1, Suite 201
Expenditure from	Dethall MA 00011
corporate funds	Bothell, WA 98011
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Solicitation/Fundraising Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Data for Fundraising
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 10/20 Rpt: 44/54	The 134 Political Action Committee 00085309
4 Date	5 Payee name
07/15/2024	Later.com
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$42.56	88 E Pender Street
Expenditure from corporate funds	Vancouver Canada
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Monthly fee to maintain social media accounts
	monthly too to maintain coolai moda accounte
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
08/15/2024	Later.com
Amount (\$)	Payee address; City; State; Zip Code
\$42.64	88 E Pender Street
·	
Expenditure from corporate funds	Vancouver Canada
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Monthly Fee to organize social media
	Monthly Fee to organize social media
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Davies same
09/16/2024	Payee name
	Later.com
Amount (\$)	Payee address; City; State; Zip Code
\$42.64	88 E Pender Street
Expenditure from corporate funds	Vancouver Canada
PURPOSE	1
OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Monthly Fee for social media management
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 11/20 Rpt: 45/54	The 134 Political Action Committee 00085309
4 Date	5 Payee name
10/15/2024	Later.com
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$42.64	88 E Pender Street
Expenditure from corporate funds	Vancouver Canada
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Monthly Fee to maintain social media accounts
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>	
Date	Payee name
11/15/2024	Later.com
Amount (\$)	Payee address; City; State; Zip Code
\$42.64	88 E Pender Street
Expenditure from	
corporate funds	Vancouver Canada
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Monthly Fee to manager social media accounts
	Worlding Fee to manager social media accounts
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
08/28/2024	Office Depot
Amount (\$)	·
\$81.19	Payee address; City; State; Zip Code 2622 Wolflin Village
Ψ01.13	2022 Wolling Village
Expenditure from corporate funds	Amarillo, TX 79109
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Fundraising print material
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee Legal Services Sa		ges/Co	ontract Labor OTHER (enter a category not listed above)		
	·		The Instruction Guide explains how	to com	plete			
1	Total pages Schedule F1:	2				3 Filer ID (Ethics Commission Filers))	
	Sch: 12/20 Rpt: 46/54		The 134 Political Action Committee 00085309					
4	Date	5	Payee name					
	08/30/2024		Office Depot					
6	Amount (\$)	7	Payee address; City; State; Zi	ip Code	9		_	
	\$104.02		2622 Wolflin Village					
	Expenditure from corporate funds		Amarillo, TX 79109					
8	PURPOSE	(2)		10	<i>1</i> D	Occariation	_	
0	OF	رم) ا	Category (See Categories listed at the top of this schedule Event Expense	e) ('	_	Description Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE		Event Expense		Ė	Check if Austin, TX, officeholder living expense		
					P	rint material for fundraising event		
9	Complete ONLY if direct		Candidate/Officeholder name Offic	e sough	nt	Office held	_	
	expenditure to benefit C/O	H						
	Date		Payee name				=	
	09/03/2024		Office Depot					
	Amount (\$)	\vdash	Payee address; City; State; Zi	in Code			_	
	\$60.57		2622 Wolflin Village	.,				
	400.01		go					
Г	Expenditure from corporate funds		Amarillo, TX 79109					
		(-)		10			_	
	PURPOSE OF	(a) 	Category (See Categories listed at the top of this schedule	e) (I	ט (י י	Description Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE		Event Expense		┝	Check if Austin, TX, officeholder living expense		
					P	Print Material for Fundraiser		
	Complete ONLY if direct		Candidate/Officeholder name Offic	e sough	nt	Office held	_	
	expenditure to benefit C/OI	Η						
	Date		Payee name				_	
	11/08/2024		Pena, Antonio					
	Amount (\$)		Payee address; City; State; Zi	in Code	-		_	
	\$500.00		440 E County Rd 2190	p • • • • • • • • • • • • • • • • • •				
	4000.00		= 500, = 200					
Г	Expenditure from corporate funds		Kingsville, TX 78363					
	-	_		1.				
	PURPOSE OF	(a) 	Category (See Categories listed at the top of this schedule	e) (I) D	Description Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE		Gift/Awards/Memorials Expense		F	Check if dustin, TX, officeholder living expense		
					В	Billboard Grant		
	Complete ONLY if direct		Candidate/Officeholder name Offic	e sough	nt	Office held		
	expenditure to benefit C/O			3				
							_	

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: Sch: 13/20 Rpt: 47/54 The 134 Political Action Committee Total Political Action Filers) 3 Filer ID (Ethics Commission Filers) 00085309 6 Amount (\$) Payee address; City; State; Zip Code P.O. Box 82 Bushland , TX 79012 8 PURPOSE OF Expenditure from Corporate funds 9 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Potter County Fundraiser -ticket purchase	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		-				
Sch: 13/20 Rpt: 47/54 The 134 Political Action Committee	Credit Card Payment The Instruction Guide explains how to complete this form.						
Solicitation/Fundraising Expense Solicitation/F	1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer)	ers)				
Potter County Democratic Party	Sch: 13/20 Rpt: 47/54	The 134 Political Action Committee 00085309					
Potter County Democratic Party	/ Date	5 Payes name					
Famount (S) Payee address: City: State: Zip Code P.O. Box 82							
Expenditure from composite funds P.O. Box 82							
Expenditure from corporate funds Bushland , TX 79012 (a) Category (See Categories listed at the top of this scheaule) Candidate Office held Offi	` ′						
Complete QNLY if direct expenditure to benefit C/OH	\$1,000.00	P.O. Box 82					
Solicitation/Fundraising Expense Check if invest outside of Texas. Complete Schedule T. Check if Aussin, TX, officeholder for personal property of the Schedule of Texas. Complete Schedule T. Check if Aussin, TX, officeholder for personal property of the Schedule of Texas. Complete Schedule T. Check if Aussin, TX, officeholder for personal property of the Schedule of Texas. Complete Schedule T. Check if Aussin, TX, officeholder for personal property of the Schedule of Texas. Complete Schedule T. Check if Aussin, TX, officeholder for personal property of the Schedule of Texas. Complete Schedule T. Check if Aussin, TX, officeholder fiving expense C		Bushland , TX 79012					
Creek if wave clusted in trace, complete Schedule T. Creek if Austin, TX, officeholder living expense Potter County Fundraiser - ticket purchase	8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
Check if Austin, TX, Officeholder Inving expense		l — — — — — — — — — — — — — — — — — — —					
9 Complete ONLY if direct expenditure to benefit C/OH Date	EXPENDITURE						
Date 08/28/2024 Potter County Democratic Party Amount (\$) Payee address; City; State; Zip Code P.O. Box 82 Expenditure from corporate funds Bushland , TX 79012		Potter County Fundraiser -ticket purchase					
Date 08/28/2024 Potter County Democratic Party Amount (\$) Payee address; City; State; Zip Code P.O. Box 82 Expenditure from corporate funds Bushland , TX 79012							
Amount (\$)							
Amount (\$)	Date	Pavee name					
Amount (\$)	08/28/2024	· ·					
\$1,000.00 P.O. Box 82 Expenditure from corporate funds Bushland , TX 79012							
Expenditure from corporate funds PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if ravel outside of Texas. Complete Schedule T.	` ′						
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraiser-purchase of tickets/seating Complete ONLY if direct expenditure to benefit C/OH Date 10/24/2024 Amount (\$) Payee name Venable , Desiree Amount (\$) Payee address; City; State; Zip Code \$500.00 Bastrop , TX 78602 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) OF EXPENDITURE Complete ONLY if direct Candidate/Officeholder name Office sought Office held	\$1,000.00	P.O. Box 82					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraiser-purchase of tickets/seating Complete ONLY if direct expenditure to benefit C/OH Date 10/24/2024 Amount (\$) Payee name Venable , Desiree Amount (\$) Payee address; City; State; Zip Code \$500.00 Bastrop , TX 78602 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) OF EXPENDITURE Complete ONLY if direct Candidate/Officeholder name Office sought Office held	Expenditure from						
Solicitation/Fundraising Expense Solicitation/Fundraising Expense Solicitation/Fundraising Expense Solicitation/Fundraising Expense Check if Austin, TX, officeholder living expense Fundraiser-purchase of tickets/seating Complete ONLY if direct expenditure to benefit C/OH Date Payee name Venable , Desiree Amount (\$) Payee address; City; State; Zip Code \$500.00 120 Meadwood Dr Expenditure from corporate funds Bastrop , TX 78602 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Sought Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held Office held Office held Office held Office held		Bushland , TX 79012					
Solicitation/Fundraising Expense	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
Complete ONLY if direct expenditure to benefit C/OH Date Payee name 10/24/2024 Venable, Desiree Amount (\$) Payee address; City; State; Zip Code \$500.00 120 Meadwood Dr Expenditure from corporate funds Bastrop, TX 78602 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Billboard Grant Complete ONLY if direct Candidate/Officeholder name Office sought Office held	_						
Complete ONLY if direct expenditure to benefit C/OH Date	EXPENDITURE						
Date		Fundraiser-purchase of tickets/seating					
Date							
Amount (\$) Payee address; City; State; Zip Code \$500.00 Payee address; City; State; Zip Code 120 Meadwood Dr Expenditure from corporate funds Bastrop , TX 78602 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Billboard Grant Complete ONLY if direct Candidate/Officeholder name Office sought Office held							
Amount (\$) Payee address; City; State; Zip Code \$500.00 Payee address; City; State; Zip Code 120 Meadwood Dr Expenditure from corporate funds Bastrop , TX 78602 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Billboard Grant Complete ONLY if direct Candidate/Officeholder name Office sought Office held	Date	Pavee name					
Amount (\$) Payee address; City; State; Zip Code \$500.00 120 Meadwood Dr Expenditure from corporate funds Bastrop , TX 78602 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense Complete ONLY if direct Candidate/Officeholder name Office sought Ode Office held							
\$500.00 120 Meadwood Dr Expenditure from corporate funds Bastrop , TX 78602 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Billboard Grant Complete ONLY if direct Candidate/Officeholder name Office sought Office held		<u> </u>					
Expenditure from corporate funds PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Billboard Grant Complete ONLY if direct Candidate/Officeholder name Office sought Office held							
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Billboard Grant Complete ONLY if direct Candidate/Officeholder name Office sought Office held	\$500.00	120 Meadwood Dr					
OF EXPENDITURE Gift/Awards/Memorials Expense Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Billboard Grant Complete ONLY if direct Candidate/Officeholder name Office sought Office held		Bastrop , TX 78602					
OF EXPENDITURE Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Billboard Grant Complete ONLY if direct Candidate/Officeholder name Office sought Office held		(a) Category (See Categories listed at the top of this schedule) (b) Description					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held		Gift/Awards/Memorials Expense					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	EXPENDITORE						
		Billboard Grant					
expenditure to benefit C/OH							
	expenditure to benefit C/OI	DH					
			$\overline{}$				
Forms provided by Tayas Ethics Commission www.athics state ty us Version V// 1.0 5dd2aca2			10				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 14/20 Rpt: 48/54	The 134 Political Action Committee	00085309
4 Date	5 Payee name	·
07/05/2024	Weatherford Democrat	
6 Amount (\$)	7 Payee address; City; State; Zip Code	е
\$15.99	512 Palo Pinto St.	
Evnanditura from		
Expenditure from corporate funds	Weatherford, TX 76086	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Monthly subscription fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/Ol		it Office field
Data		
Date 08/05/2024	Payee name Weatherford Democrat	
Amount (\$)	Payee address; City; State; Zip Code	е
\$15.99	512 Palo Pinto St.	
Expenditure from		
corporate funds	Weatherford, TX 76086	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Monthly Subscription Fee Media
		,
Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O	4	
Date	Payee name	
11/12/2024	Wilson County Democratic Party	
Amount (\$)	Payee address; City; State; Zip Code	e
\$1,000.00	P. O. Box 756	
. ,		
Expenditure from corporate funds	Floresville , TX 78114	
PURPOSE		b) Description
OF	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Cital wards memorial Expense	Check if Austin, TX, officeholder living expense
		Billboard Grant
Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/OI	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 15/20 Rpt: 49/54	2 FILER NAME The 134 Political Action Committee 3 Filer ID (Ethics Commission Filers) 00085309
4 Date 07/29/2024	5 Payee name Zoom
6 Amount (\$) \$17.04 Expenditure from corporate funds 8 PURPOSE OF EXPENDITURE	7 Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
O Complete ONLY if divert	Monthly Fee for online video conference services Candidate/Officeholder name Office sought Office held
Complete ONLY if direct expenditure to benefit C/OI	
Date 08/27/2024	Payee name Zoom
Amount (\$) \$17.04 Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly online video conference fee
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 10/28/2024	Payee name Zoom
Amount (\$) \$17.04 Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly Website
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 16/20 Rpt: 50/54	The 134 Political Action Committee 00085309
4 Date	5 Payee name
12/27/2024	Zoom
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$17.04	55 Almaden Blvd
	6th Floor
Expenditure from corporate funds	San Jose, CA 95113
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Monthly Fee for video conference services
	Monthly Fee for video conference services
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
07/31/2024	iPay
Amount (\$)	Payee address; City; State; Zip Code
\$4.95	918 Abner
Expenditure from corporate funds	Waycross, GA 31501
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Google bill pay fee
	Google bill pay lee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Dete	
Date	Payee name
08/30/2024	iPay
Amount (\$)	Payee address; City; State; Zip Code
\$4.95	918 Abner
Expenditure from	
corporate funds	Waycross, GA 31501
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
LA LADITORL	Check if Austin, TX, officeholder living expense
	Fee for online services
Complete ONLY If allow	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 17/20 Rpt: 51/54	The 134 Political Action Committee 00085309
4 Date	5 Payee name
09/30/2024	iPay
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4.95	918 Abner
Expenditure from corporate funds	Waycross, GA 31501
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Monthly Fee online services
	Monthly 1 de online services
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
5.	
Date	Payee name
10/31/2024	iPay
Amount (\$)	Payee address; City; State; Zip Code
\$4.95	918 Abner
Expenditure from corporate funds	Waycross, GA 31501
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Monthly online payment fee
	Monthly offiline payment fee
Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/29/2024	iPay
Amount (\$)	Payee address; City; State; Zip Code
\$4.95	918 Abner
- Formanditure Cons	
Expenditure from corporate funds	Waycross, GA 31501
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EAPENDITUKE	Check if Austin, TX, officeholder living expense
	Monthly Fee for online payments
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
CAPCITALITIE TO DETICITE C/OI	•

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

Credit Card Layment	The Instruction Guide explains how to con	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 18/20 Rpt: 52/54	The 134 Political Action Committee	00085309
4 Date	5 Payee name	•
12/31/2024	iPay	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de
\$4.95	918 Abner	
Expenditure from		
corporate funds	Waycross, GA 31501	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Monthly Fee for online payment
		manuary and a sum a paymont
9 Complete ONLY if direct	Candidate/Officeholder name Office soug	ght Office held
expenditure to benefit C/OI	4	
Date	Payee name	
07/26/2024	wix.com	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$31.39	500 Tery A Francois Blvd	
Expenditure from corporate funds	San Fransciso , CA 94158	
PURPOSE OF	o , (g	(b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Monthly fee to maintain website
Complete ONLY if direct	Candidate/Officeholder name Office soug	ght Office held
expenditure to benefit C/OI	1	
Date	Payee name	
08/26/2024	wix.com	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$31.39	500 Tery A Francois Blvd	
Expenditure from corporate funds	San Fransciso , CA 94158	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
LAFLINDITONE		Check if Austin, TX, officeholder living expense
		Monthly Website Fee
Complete ONLY if direct	Office court	Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	oht Office held
•		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 19/20 Rpt: 53/54	The 134 Political Action Committee 00085309
4 Date	5 Payee name
09/26/2024	wix.com
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$31.39	500 Tery A Francois Blvd
Expenditure from	
corporate funds	San Fransciso , CA 94158
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Monthly Website Fees
	menany massac rese
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
10/28/2024	wix.com
Amount (\$)	Payee address; City; State; Zip Code
\$31.39	500 Tery A Francois Blvd
Expenditure from corporate funds	San Fransciso , CA 94158
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Monthly Website Services
	monuny ressauc correct
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/26/2024	wix.com
Amount (\$)	Payee address; City; State; Zip Code
\$31.39	500 Tery A Francois Blvd
·	
Expenditure from corporate funds	San Fransciso , CA 94158
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Monthly Fee for website
	Monthly Fee to website
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 20/20 Rpt: 54/54	The 134 Political Action Committee 00085309
4 Date	5 Payee name
12/16/2024	wix.com
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$42.64	500 Tery A Francois Blvd
- Funanditura from	
Expenditure from corporate funds	San Fransciso , CA 94158
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Monthly Fee for social media management
	ygg
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/31/2024	wix.com
Amount (\$)	Payee address; City; State; Zip Code
\$31.39	500 Tery A Francois Blvd
Expenditure from corporate funds	San Fransciso , CA 94158
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Monthly Fee for website
	including the last measure
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	