#### 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) 00015831 3 COMMITTEE NAME **OFFICE USE ONLY Texas Democratic Party** Date Received **ELECTRONICALLY FILED** 01/15/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE **ADDRESS** 314 E Highland Mall Blvd, Suite 508 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78752 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** The Honorable Gilberto NAME NICKNAME LAST **SUFFIX** Hinojosa STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 314 E Highland Mall Blvd, Suite 508 STREET **ADDRESS** (Residence or Business) Austin, TX 78752 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 314 E Highland Mall Blvd MAILING **ADDRESS** Suite 508 Austin, TX 78752 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 478-9800 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** 10/27/2024 **THROUGH** 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Other Runoff 11/05/2024 χ General Special **GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texas Democratic Part	у		00015831	
14 COMMITTEE ACTIVITY	Candidates  (Identify by name or, if applicable, classify by party.)	A. Supported Raquel Saenz State Board Of	f Education	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
<b>15</b> CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	O 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)	\$	252,923.54
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	809,408.87
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	6,269.34
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	ı			
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		The Honorable	Gilberto Hino	ojosa
		Signature of Ca	ampaign Treasu	urer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, t	this the	day
		which, witness my hand and seal of office.		
Signature of officer ac	lministering oath	Printed name of officer administering oath	Title of office	cer administering oath

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

# FORM GPAC ADDENDUM

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					1 age 0 01 102
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Democratic Part	у			00015831	
14 COMMITTEE ACTIVITY	Candidates  (Identify by name or, if applicable, classify by party.)		Averie Bishop State Representa	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders     Assisted  (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	A. Supported	Chris Turner State Representat	ive	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Cins rumer State Representati	IVC	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders     Assisted  (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)	A. Supported	Kristian Carranza State Repres	entative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders     Assisted  (Identify by name or, if applicable, classify by party.)				

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

# FORM GPAC ADDENDUM

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						1 ago 1 01 102
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texas Democratic Party	,			00015831	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Jennie Birkholz State Repre	sentative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A Supported	Patrick Moses Sheriff		
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Patrick Moses Sheriii		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Robert McGinty Constable		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

## GENERAL-PURPOSE COMMITTEE REPORT:

## FORM GPAC ADDENDUM

PURPOSE					ADDENDOM
					Page 5 of 192
COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Democratic Party	/			00015831	
COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)	A. Supported		<u> </u>	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed Bill	Waybourn Sheriff		
	Measures    (Describe by date and location of election and nature of issue.)	A. Supported			
	nature of issue.)	B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				

## **SUBTOTALS - GPAC**

## FORM GPAC **COVER SHEET PG 3**

				6 of 192
17 COMMITT Texas De	EE NAME emocratic Party	<b>18</b> Filer ID 00015831	(Ethics Co	mmission Filers)
	E SUBTOTALS SCHEDULE	l	SUBT	TOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	252,923.54
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	!	\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$	
9.	SCHEDULE E: LOANS		\$	
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	808,498.43
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	910.44
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
			•	

	MONET	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDULE	A1
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 1/21 Rpt: 7/192	
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission 00015831	Filers)
4	Date 11/22/2024	<ul><li>5 Full name of contributor Adams, Cynthia</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$2.50
8	Principal occu	Houston, TX 77004 pation / Job title (See Instructions)	9	Employer (See Instructions	 s)		
	Not Employe	ed		N/A			
	Date 11/23/2024	Full name of contributor Anderson, Patricia Contributor address; City; Sta				Amount of Contribution (\$)	\$5.00
		Apex, NC 27502			Ĺ		
	Principal occupation / Job title (See Instructions)  Not Employed			Employer (See Instructions N/A	S)		
	Date	Full name of contributor	out-of-state PAC (ID#:	10/7	Т	Amount of Contribution (\$)	
	11/13/2024	Averett, Nancy  Contributor address; City; Sta					\$1.00
		Wyoming, CO 45215					
	Principal occu Journalist	pation / Job title (See Instructions)		Employer (See Instructions Self-Employed	s)		
	Date 12/13/2024	Full name of contributor Averett, Nancy Contributor address; City; Sta Wyoming, CO 45215		)		Amount of Contribution (\$)	\$1.00
	Principal occu Journalist	pation / Job title (See Instructions)		Employer (See Instructions Self-Employed	s)		
	Date 12/02/2024	Full name of contributor Basey, Kevin Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$2.50
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions Dhisco	s)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	N	S		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 2/21 Rpt: 8/192	
2	FILER NAME Texas Demo	cratic Party				3	Filer ID (Ethics Commission 00015831	Filers)
4	Date 10/29/2024	<ul><li>5 Full name of contributor Blodgett, Elaine</li><li>6 Contributor address; City; St.</li></ul>	out-of-state PAC (ID#: ate; Zip Code		)	7	Amount of Contribution (\$)	\$11.00
8	Principal occur	McDade, TX 78650 pation / Job title (See Instructions	)	9	Employer (See Instructions	;) 		
•	Not Employe		,	•	N/A	-,		
	Date 11/29/2024	Full name of contributor Blodgett, Elaine Contributor address; City; St			)		Amount of Contribution (\$)	\$11.00
		McDade, TX 78650				L		
	Not Employe	pation / Job title (See Instructions)	)		Employer (See Instructions N/A	S)		
	Date 12/29/2024	Full name of contributor Blodgett, Elaine Contributor address; City; St	out-of-state PAC (ID#:		)	•	Amount of Contribution (\$)	\$11.00
		McDade, TX 78650						
	Principal occu Not Employe	pation / Job title (See Instructions d			Employer (See Instructions N/A	5)		
	Date 10/27/2024	Full name of contributor Bos, Donald Contributor address; City; St. Austin, TX 78748			)		Amount of Contribution (\$)	\$25.00
	Principal occu School Libra	pation / Job title (See Instructions rian	)		Employer (See Instructions Austin Isd	5)		
	Date 11/27/2024	Full name of contributor Bos, Donald Contributor address; City; St	out-of-state PAC (ID#:_		)		Amount of Contribution (\$)	\$25.00
	Principal occu School Libra	pation / Job title (See Instructions rian			Employer (See Instructions Austin Isd	5)		
			·					

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/21 Rpt: 9/192	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	ı Filers)
4	Date 12/27/2024	5 Full name of contributor out-of-state PAC (ID#:_ Bos, Donald  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00
_	Dringing Lagor	Austin, TX 78748	D. Frankriger (Co.) Instructions			
8	School Libra	ıpation / Job title (See Instructions) ırian	9 Employer (See Instructions) Austin Isd	)		
	Date 11/10/2024	Full name of contributor out-of-state PAC (ID#:_ Bowman, Christine  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1.00
	Dringing occu	Kingsland, TX 78639	Employer (See Instructions			
	Nurse	pation / Job title (See Instructions)	Employer (See Instructions) Arc Nutra	)		
	Date 12/02/2024	Full name of contributor out-of-state PAC (ID#:_ Boyer, Lynette Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$2.50
		Round Rock, TX 78665				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A	)		
	Date 12/02/2024	Full name of contributor out-of-state PAC (ID#:_ Cox, Pamela Contributor address; City; State; Zip Code Fresno, TX 77545			Amount of Contribution (\$)	\$12.50
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions N/A	)		
	Date 11/06/2024	Full name of contributor out-of-state PAC (ID#:_ Crawford, Marshall Contributor address; City; State; Zip Code  Hot Springs, NC 28743			Amount of Contribution (\$)	\$10.00
	Principal occu Merchant	ipation / Job title (See Instructions)	Employer (See Instructions Earth Guild	)		

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to o	complete this form	n.	1	Total pages Schedule A1: Sch: 4/21 Rpt: 10/192	
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commissio 00015831	n Filers)
4	Date 10/31/2024	Cronkite, Kathy	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Austin, TX 78763 pation / Job title (See Instructions)	la la	Employer (See Instructions			
0	Not Employe			N/A	')		
	Date 11/30/2024	Cronkite, Kathy  Contributor address; City; State; 2				Amount of Contribution (\$)	\$10.00
	Principal occur	Austin, TX 78763 pation / Job title (See Instructions)		Employer (See Instructions	7		
	Not Employe			N/A	')		
	Date 12/31/2024	Full name of contributor of cronkite, Kathy  Contributor address; City; State; Z	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
		Austin, TX 78763	1				
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 10/28/2024	Dallas County Democratic Par		)		Amount of Contribution (\$)	\$64,260.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 11/08/2024	Full name of contributor on Davis, Erwin  Contributor address; City; State; Zubittle Elm, TX 75068	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$12.50
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
			,				

	MONET	ARY POLITICAL CONTRIBU	JTION	IS		SCHEDULE A1
	The Instruc	tion Guide explains how to complete t	this for	n.	1	Total pages Schedule A1: Sch: 5/21 Rpt: 11/192
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission Filers) 00015831
4	Date 11/08/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$) \$2.50
8	Principal occu Not Employe	Alvin, TX 77511  pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)	
	Date 11/20/2024	Full name of contributor  out-of-state PAC  Delgado, Michael		)		Amount of Contribution (\$) \$1.50
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> S)	
	Date 12/10/2024	Full name of contributor out-of-state PAC Democratic Infrastructure Fund  Contributor address; City; State; Zip Code	C (ID#:		•	Amount of Contribution (\$) \$19,145.00
	Principal occu	Austin, TX 78763 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> S)	
	Date 11/13/2024	Full name of contributor out-of-state PAC Democratic Infrastructure Fund  Contributor address; City; State; Zip Code  Austin, TX 78763				Amount of Contribution (\$) \$19,145.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>1</u> S)	
	Date 12/02/2024	Full name of contributor out-of-state PAC Diaz, Sylvia  Contributor address; City; State; Zip Code  San Antonio, TX 78253		)		Amount of Contribution (\$) \$1.50
	Principal occup Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	s)	
			•			

	MONET	ARY POLITICAL CONTRI	IBUTION	IS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to compl	ete this forr	n.	1	Total pages Schedule A1: Sch: 6/21 Rpt: 12/192	
2	FILER NAME Texas Demo	ocratic Party			3	Filer ID (Ethics Commission 00015831	Filers)
4	Date 10/29/2024	<ul> <li>Full name of contributor  out-of-state  out-o</li></ul>		)	7	Amount of Contribution (\$)	\$25.00
_		Glen Rose, TX 76043	1-		Ĺ		
8	Principal occu Nurse Educa	pation / Job title (See Instructions) ator	9	Employer (See Instructions Tarleton State Universit			
	Date 11/29/2024	Evans, Carol  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$25.00
	Glen Rose, TX 76043  Principal occupation / Job title (See Instructions)  En			Employer (See Instructions	<u> </u>		
	Nurse Educator			Tarleton State University			
	Date 12/29/2024	Full name of contributor out-of-state Evans, Carol Contributor address; City; State; Zip Code	te PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
		Glen Rose, TX 76043					
	Principal occu Nurse Educa	pation / Job title (See Instructions) ator		Employer (See Instructions Tarleton State University	′		
	Date 12/23/2024	Evans, Kim		)		Amount of Contribution (\$)	\$5.00
	Principal occu Manager	pation / Job title (See Instructions)		Employer (See Instructions Karis	<u> </u> 5)		
	Date 11/11/2024	Full name of contributor out-of-stated pout-of-stated po	te PAC (ID#:			Amount of Contribution (\$)	\$2.50
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
			'				

	MONET	ARY POLITICAL C	ONTRIBUTION	S		SCHEDU	LE <b>A1</b>
	The Instruc	ction Guide explains how	to complete this forn	n.	1	Total pages Schedule A1: Sch: 7/21 Rpt: 13/192	
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commissi 00015831	on Filers)
4	Date 11/08/2024	6 Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code	)	7	Amount of Contribution (\$)	\$2.50
8	Principal occu	Merkel, TX 79536 pation / Job title (See Instructions)	9	Employer (See Instructions	)		
	Not Employe	d		N/A			
	Date 11/08/2024	Full name of contributor  Gao, Robert  Contributor address; City; Sta		)		Amount of Contribution (\$)	\$1.50
	Dringinal occur	Wharton, TX 77488		Employer (See Instructions			
	Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions N/A	)		
	Date 11/13/2024	Full name of contributor [Gauldin, Gay Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code			Amount of Contribution (\$)	\$12.50
		Houston, TX 77005					
	Principal occup Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions N/A	)		
	Date 12/02/2024	Full name of contributor  Harding, Carlotta  Contributor address; City; Sta  Tomball, TX 77377	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$2.50
	Principal occup Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	)		
	Date 10/28/2024	Full name of contributor  Hoffman, Michael  Contributor address; City; Sta  Dallas, TX 75230	out-of-state PAC (ID#: ite; Zip Code	)		Amount of Contribution (\$)	\$10,000.00
	Principal occup Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	)		
			,				

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 8/21 Rpt: 14/192	
2	FILER NAME Texas Demo	ocratic Party			3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 11/15/2024	<ul><li>5 Full name of contributor  Hollis, Colin</li><li>6 Contributor address; City; State;</li></ul>		)	7	Amount of Contribution (\$)	\$15.00
_	District	Austin, TX 78757	T <sub>a</sub>	Faralas as (Cara la describir a	<u></u>		
8	Non Profit Di	pation / Job title (See Instructions) irector	9	Employer (See Instructions lcut	5)		
	Date 12/15/2024	Full name of contributor Hollis, Colin Contributor address; City; State; Austin, TX 78757	out-of-state PAC (ID#: ; Zip Code			Amount of Contribution (\$)	\$15.00
		pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Non Profit Di	irector		Icut			
	Date 11/08/2024	Full name of contributor Hood, Sharran  Contributor address; City; State;	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$2.50
		Grapevine, TX 76051					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	s)		
	Date 11/14/2024	Full name of contributor  House Democratic Campaigr  Contributor address; City; State;  Austin, TX 78767		)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/14/2024	Full name of contributor  House Democratic Campaigr  Contributor address; City; State;  Austin, TX 78767		)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			L				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/21 Rpt: 15/192
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission Filers) 00015831
4	Date 11/14/2024	5 Full name of contributor out-of-state PAC (ID#:_ House Democratic Campaign Committee  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$) \$15,000.00
		Austin, TX 78767			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)	
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ House Democratic Campaign Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)	
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#:_ House Democratic Campaign Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$22,650.00
	Principal occu	Austin, TX 78767 pation / Job title (See Instructions)	Employer (See Instructions	)	
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)
	12/11/2024	House Democratic Campaign Committee  Contributor address; City; State; Zip Code  Austin, TX 78767			\$19,250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)	
	Date 12/23/2024	Full name of contributor out-of-state PAC (ID#:_ House Democratic Campaign Committee Contributor address; City; State; Zip Code	)		Amount of Contribution (\$) \$19,250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)	

	MONEI	ARY POLITICAL (	CONTRIBUTIO	NS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains hov	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/21 Rpt: 16/192	
2	FILER NAME				3	Filer ID (Ethics Commission	r Filers)
	Texas Demo	-	_		L	00015831	
4	Date 11/23/2024	<ul><li>5 Full name of contributor</li><li>Johansen, Roberta</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$2.00
8	Principal occu	Bartlesville, OK 74003 pation / Job title (See Instructions	5)	Employer (See Instructions			
•	Assistant	patient, des aus (ess menusuent		Healthcare Innovations	-,		
	Date 11/08/2024	Full name of contributor Johnson, Johnnie Contributor address; City; S	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$12.50
		Schertz, TX 78154	,		Ĺ		
	Not Employe	pation / Job title (See Instructions	5)	Employer (See Instructions N/A	S)		
					_		
	Date 11/20/2024	Full name of contributor Jones, Ellen Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code	)		Amount of Contribution (\$)	\$1.00
		Paradise, TX 76073					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	<u>                                      </u>		
	Not Employe			N/A	•		
	Date 11/12/2024	Full name of contributor Kell, William Contributor address; City; S El Paso, TX 79912				Amount of Contribution (\$)	\$2.50
	Principal occu Vice Preside	pation / Job title (See Instructions ent	5)	Employer (See Instructions Fmm	5)		
	Date 10/31/2024	Full name of contributor Kirby, Susan Contributor address; City; S Austin, TX 78748	out-of-state PAC (ID#:_		•	Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	5)	Employer (See Instructions N/A	5)		
			<del></del>				

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDULE A1
	The Instruc	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 11/21 Rpt: 17/192
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission Filers) 00015831
4	Date 11/30/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$) \$25.00
8	Principal occu	Austin, TX 78748 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)	
	Date 11/08/2024	Full name of contributor out-of-state PAC (ID#:_ Klores, Jill Contributor address; City; State; Zip Code		N/A )	•	Amount of Contribution (\$) \$12.50
	Principal occu Lighting Deig	Dallas, TX 75214 pation / Job title (See Instructions) ger		Employer (See Instructions	<u> </u> s)	
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_ Kristian Carranza For State House District 118 Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$18,100.00
	Principal occu	San Antonio, TX 78221 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)	
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#:_ Lesky, Cynthia Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	<u>                                      </u>	
	Date 12/04/2024	Full name of contributor out-of-state PAC (ID#:_Lesky, Cynthia  Contributor address; City; State; Zip Code  Austin, TX 78731				Amount of Contribution (\$) \$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)	

	MONET	ARY POLITICAL CONTRIB	BUTION	IS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to complet	e this for	n.	1	Total pages Schedule A1: Sch: 12/21 Rpt: 18/192	
2	FILER NAME Texas Demo	ocratic Party			3	Filer ID (Ethics Commission 00015831	Filers)
4	Date 11/11/2024	<ul> <li>Full name of contributor  out-of-state F Lipnicky, David</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$5.00
_	5	Grand Prairie, TX 75050	la la	5 1 (0 1 1 1	<u></u>		
8		pation / Job title (See Instructions) t & Program Analyst	9	Employer (See Instructions U.S. Dept. of Labor	5)		
	Date 12/11/2024	Full name of contributor out-of-state F Lipnicky, David Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$5.00
	Principal occu	Grand Prairie, TX 75050 pation / Job title (See Instructions)		Employer (See Instructions	<u>;)</u>		
	•	t & Program Analyst		U.S. Dept. of Labor	-,		
	Date 11/23/2024	Full name of contributor out-of-state F Lyerly, Linda Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
		Lahaina, HI 96761					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	5)		
	Date 12/31/2024	Full name of contributor out-of-state F Martir, Magda Contributor address; City; State; Zip Code Houston, TX 77079		)	•	Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 12/18/2024	Full name of contributor out-of-state F Mason, Berthine Contributor address; City; State; Zip Code Spring, TX 77373	PAC (ID#:	)	•	Amount of Contribution (\$)	\$2.50
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	s)		
			•				

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how t	to complete this for	m.	1	Total pages Schedule A1: Sch: 13/21 Rpt: 19/192	
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission 00015831	Filers)
4	Date 11/08/2024	<ul><li>5 Full name of contributor</li></ul>	out-of-state PAC (ID#: te; Zip Code	)	7	Amount of Contribution (\$)	\$5.00
8	Principal occur	Fate, TX 75087 pation / Job title (See Instructions)	la la	Employer (See Instructions	s)		
0	Not Employe		9	N/A	>)		
	Date 11/03/2024	Full name of contributor  Mechaly, Orly  Contributor address; City; Stat		)	•	Amount of Contribution (\$)	\$25.00
		Olney, MD 20830	,		L		
	Principal occup Business Ana	pation / Job title (See Instructions) alysts		Employer (See Instructions Woodbourne Solution	S)		
	Date 11/08/2024	Full name of contributor Mistretta, Toni-Ann Contributor address; City; Stat	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$5.00
		Holiday Lakes, TX 77515					
	Principal occup Biostatisticia	pation / Job title (See Instructions) n		Employer (See Instructions Baylor College of Medic			
	Date 10/29/2024	Full name of contributor  Moczulski, Andrew  Contributor address; City; Stat  Erie, PA 16506	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions SBS Valuations	5)		
	Date 11/23/2024	Full name of contributor  Montero, Pilar  Contributor address; City; Stat  Sausalito, CA 94965	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$7.00
	Principal occup Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 14/21 Rpt: 20/192	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 12/23/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Montero, Pilar</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$7.00
8	Principal occu	Sausalito, CA 94965  upation / Job title (See Instructions)	9 Employer (See Instructions N/A	)		
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#:_Morgan Kirkpatrick for SBOE 15 Campaign  Contributor address; City; State; Zip Code  Lubbock, TX 79464  upation / Job title (See Instructions)	1	)	Amount of Contribution (\$)	\$3,000.00
	Date 11/14/2024	Full name of contributor out-of-state PAC (ID#:_Moser, Megan  Contributor address; City; State; Zip Code  Richardson, TX 75080	)		Amount of Contribution (\$)	\$1.00
	Principal occu	upation / Job title (See Instructions) ve Assistant	Employer (See Instructions Ut Dallas	)		
	Date 11/08/2024	Full name of contributor out-of-state PAC (ID#:_Mourtaja, Anne  Contributor address; City; State; Zip Code  Rockport, TX 78382	)		Amount of Contribution (\$)	\$2.50
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A	)		
	Date 10/27/2024	Full name of contributor out-of-state PAC (ID#:_Nilsen, Benjamin  Contributor address; City; State; Zip Code  Vallejo, CA 94589	)		Amount of Contribution (\$)	\$2.27
	Principal occu Process Tec	upation / Job title (See Instructions) chnician	Employer (See Instructions Thermo Fisher Scientific			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/21 Rpt: 21/192	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 10/31/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Nora Longoria for 13th Court of Appeals Place 2</li> <li>Contributor address; City; State; Zip Code</li> </ul>	,	7	Amount of Contribution (\$)	\$4,000.00
		Corpus Christi, TX 78740				
8	Principal occu	pation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)	)		
	Date 11/08/2024	Full name of contributor out-of-state PAC (ID#:_ Olson, Ryan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1.00
	Dringing! goog	Beaumont, TX 77707	Employer (Coa Instructions			
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions) Texas Beard Company	)		
	Date 11/16/2024	Full name of contributor out-of-state PAC (ID#:_ Peterson, Joshua Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00
		Lewisville, TX 75057				
	Principal occu Cash Logisti	pation / Job title (See Instructions)	Employer (See Instructions) Brinks	)		
	Date 11/24/2024	Full name of contributor out-of-state PAC (ID#:_ Pichon, Edward  Contributor address; City; State; Zip Code  McKinney, TX 75070			Amount of Contribution (\$)	\$10.00
	Principal occu Engineering	pation / Job title (See Instructions)	Employer (See Instructions) E-Qualus Partners LLC	)		
	Date 12/24/2024	Full name of contributor out-of-state PAC (ID#:_Pichon, Edward  Contributor address; City; State; Zip Code  McKinney, TX 75070			Amount of Contribution (\$)	\$10.00
	Principal occu Engineering	pation / Job title (See Instructions) Consultant	Employer (See Instructions) E-Qualus Partners LLC	)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 16/21 Rpt: 22/192	
2	FILER NAME Texas Demo	cratic Party				3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 11/12/2024	6 Contributor address; City; St	out-of-state PAC (ID#:		)	7	Amount of Contribution (\$)	\$5.00
8	Principal occu	Amarillo, TX 79102 pation / Job title (See Instructions	9	<u> </u>	Employer (See Instructions	 5)		
	Not Employee Date 11/25/2024	Full name of contributor Raschke, Donald Contributor address; City; St.			N/A)		Amount of Contribution (\$)	\$65.00
	Principal occu	Brenham, TX 77833 pation / Job title (See Instructions			Employer (See Instructions Retired	  -  s)		
	Date 12/25/2024	Full name of contributor Raschke, Donald Contributor address; City; St.	out-of-state PAC (ID#:atte; Zip Code				Amount of Contribution (\$)	\$65.00
	Principal occu	Brenham, TX 77833 pation / Job title (See Instructions			Employer (See Instructions	<u> </u> s)		
	Date 12/18/2024	Full name of contributor Reynolds, Ronald Contributor address; City; St. Missouri City, TX 77459			)		Amount of Contribution (\$)	\$1,000.00
	Principal occu State Repres	pation / Job title (See Instructions sentative			Employer (See Instructions Civitas Engineering Gro	•		
	Date 11/13/2024	Full name of contributor Roberts-Miller, Jimmy Contributor address; City; St. Austin, TX 78757	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions			Employer (See Instructions N/A	 s)		
			·					

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDULE	A1
	The Instruc	ction Guide explains how to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 17/21 Rpt: 23/192	
2	FILER NAME Texas Demo	ocratic Party			3	Filer ID (Ethics Commission 00015831	Filers)
4	Date 12/13/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$100.00
8	Principal occur	Austin, TX 78757 pation / Job title (See Instructions)	0	Employer (See Instructions	·/-		
0	Not Employe		9	N/A	·)		
	Date 11/11/2024	Full name of contributor out-of-state PAC (ID#:_ Rohde, Carl Contributor address; City; State; Zip Code		)	•	Amount of Contribution (\$)	\$1.00
		Alexandria, VA 22314					
		pation / Job title (See Instructions) Information Specialist		Employer (See Instructions Bureau of Land Manage		ent	
	Date 11/11/2024	Full name of contributor out-of-state PAC (ID#:_ Ross, Tom Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$10.00
	Principal occur	Sterling Heights, MI 48312 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	Managemen	· · · · · · · · · · · · · · · · · · ·		Vmware	-,		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_Ross, Tom Contributor address; City; State; Zip Code Sterling Heights, MI 48312		)	•	Amount of Contribution (\$)	\$10.00
	Principal occu Managemen	pation / Job title (See Instructions)		Employer (See Instructions Vmware	5)		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:_Schneider, Marilyn  Contributor address; City; State; Zip Code  Castro Valley, CA 94552			•	Amount of Contribution (\$)	\$2.27
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions Lawrence Livermore Na		nal Laboratory	
	•		<u> </u>			· · · · · · · · · · · · · · · · · · ·	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this t	orm.	1	Total pages Schedule A1: Sch: 18/21 Rpt: 24/192	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	ı Filers)
4	Date 11/25/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Smart, Patricia</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$)	\$5.00
_	Deignaignal	Abilene, TX 79605	D. Frankrije (Coo knotwisting			
8	Not Employe	pation / Job title (See Instructions) ed	9 Employer (See Instructions N/A	5)		
	Date 12/25/2024	Full name of contributor out-of-state PAC (ID#:_ Smart, Patricia Contributor address; City; State; Zip Code Abilene, TX 79605			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 10/30/2024	Full name of contributor out-of-state PAC (ID#:_ Smith, T. Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Houston, TX 77084 pation / Job title (See Instructions)	Employer (See Instructions			
	Not Employe		N/A	')		
	Date 11/30/2024	Full name of contributor out-of-state PAC (ID#:_Smith, T.  Contributor address; City; State; Zip Code  Houston, TX 77084	)		Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A	5)		
	Date 12/30/2024	Full name of contributor out-of-state PAC (ID#:_Smith, T.  Contributor address; City; State; Zip Code  Houston, TX 77084			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions N/A	()		

	MONET	ARY POLITICAL CONT	TRIBUTION	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how to co	mplete this forr	n.	1	Total pages Schedule A1: Sch: 19/21 Rpt: 25/192	
2	FILER NAME Texas Demo	cratic Party			3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 12/03/2024	Stern, Janice  6 Contributor address; City; State; Zip		)	7	Amount of Contribution (\$)	\$1.00
8	Principal occu Not Employe	Houston, TX 77095 pation / Job title (See Instructions)	9	Employer (See Instructions N/A	5)		
	Date 12/03/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu It Manager	Oakland, CA 94607 pation / Job title (See Instructions)		Employer (See Instructions University of California	j)		
	Date 11/08/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-		)		Amount of Contribution (\$)	\$350.00
	Principal occu	Granbury, TX 76048 pation / Job title (See Instructions)		Employer (See Instructions	j)		
	Date 11/02/2024	Thompson, Gregory  Contributor address; City; State; Zip				Amount of Contribution (\$)	\$10.00
	Principal occu	Bedford, VA 24523 pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 11/01/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:			Amount of Contribution (\$)	\$5,520.00
	Principal occu State Repres	pation / Job title (See Instructions) sentative		Employer (See Instructions House District 101	5)		
			1				

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 20/21 Rpt: 26/192	
2	FILER NAME Texas Demo			3	Filer ID (Ethics Commission 00015831	on Filers)
4	Date 11/03/2024			7	Amount of Contribution (\$)	\$20,000.00
		Dallas, TX 75205				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions) Retired	)		
	Date Full name of contributor out-of-state PAC (ID#:)  12/19/2024 Vetterling, Caroline  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Houston, TX 77098  spation / Job title (See Instructions)	Employer (See Instructions	)		
	СРА	,	Blazek & Vetterling	,		
	Date Full name of contributor out-of-state PAC (ID#:)  12/02/2024 Wehring, Charles  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2.50	
		Houston, TX 77004				
	•	pation / Job title (See Instructions) care Practitioner	Employer (See Instructions) TCH	)		
	Date 11/12/2024	Full name of contributor out-of-state PAC (ID#:_ Whitehouse, Larry Contributor address; City; State; Zip Code Benbrook, TX 76116	)		Amount of Contribution (\$)	\$5.00
	Principal occupation / Job title (See Instructions)  Not Employed  N/A  Employer (See Instruction N/A		Employer (See Instructions N/A	)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Winterbottom, Anna Contributor address; City; State; Zip Code Sandia, TX 78383			Amount of Contribution (\$)	\$12.50
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A	)		

	MONET	TARY POLITICAL CONTRIBUTI	IONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 21/21 Rpt: 27/192
	FILER NAME			3 Filer ID (Ethics Commission Filers) 00015831
4	Texas Democratic Party  Date  11/09/2024  5 Full name of contributor out-of-state PAC (ID#:)  Yearout, Cody  6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$2.50	
		Mesquite, TX 75150		
		upation / Job title (See Instructions) ion Engineer	9 Employer (See Instruction Txdot	ons)

### 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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	Il 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: 1/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	3145 PHMB LP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,348.37	812 San Antonio, Ste 105
Expenditure from corporate funds	Austin, TX 78701
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Rent
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$691.96	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll Taxes
2 1 2 2 1 1 2 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$365.34	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<del>1</del>

### 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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

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: 2/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$34.08	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$34.27	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/30/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$88.44	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/OI	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 Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	Il 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: 3/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$569.60	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Garnishment
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/30/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$978.62	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/30/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$383.89	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

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: 4/162 Rpt:	Texas Democratic Party 00015831
	i l
4 Date	5 Payee name
10/30/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$181.21	3724 Executive Center Drive
Expenditure from	Auctin TV 70721
corporate funds	Austin, TX 78731
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Payroll Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H .
Date	Payee name
10/30/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$402.43	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/30/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$428.96	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll Taxes
	T dyfoli Tuxes
Operation Children	Our Highest (Office health a group of the control o
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
SAPORGICATO TO DOTICAL O/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

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 c	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID	(Ethics Commission Filers)
Sch: 5/162 Rpt:	Texas Democratic Party		00015831	
4 Date	5 Payee name			
10/30/2024	ADP			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$383.89	3724 Executive Center Drive			
— Formarditure from				
Expenditure from corporate funds	Austin, TX 78731			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outs Check if Austin, TX	side of Texas. Com X. officeholder living	-
		Payroll Taxes	t, uniocholaci it	γεκρείτου
9 Complete ONLY if direct	Candidate/Officeholder name Office so	<u> </u>	Office he	eld
expenditure to benefit C/OI	4			
Date	Payee name			
10/30/2024	ADP			
Amount (\$)	Payee address; City; State; Zip C	 ode		
\$94.41	3724 Executive Center Drive			
Expenditure from corporate funds	Austin, TX 78731	<del>.</del>		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	the of Taylor Com	L. Ochoda T
EXPENDITURE	Salaries/Wages/Contract Labor	ı <u>–</u>	side of Texas. Com X, officeholder living	
		Payroll Taxes	,,	7 - 7 - 7
Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office he	eld
expenditure to benefit C/OI	1			
Date	Payee name			
10/30/2024	ADP			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$723.97	3724 Executive Center Drive			
- "				
Expenditure from corporate funds	Austin, TX 78731			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor	ı <u>–</u>	side of Texas. Com	
		Payroll Taxes	X, officeholder living	y expense
		Payroll raxes		
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	ught	Office he	
expenditure to benefit C/OI		agnt	Office fie	สน

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

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: 6/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$65.92	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
` '	
\$171.45	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Mages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	· ·
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$428.97	3724 Executive Center Drive
ψ 120.01	
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
LAI LINDITORE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
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

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 h	ow to comple	ete this form.
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 7/162 Rpt:	Texas Democratic Party		00015831
4 Date	5 Payee name		·
11/22/2024	ADP		
6 Amount (\$)	7 Payee address; City; State;	Zip Code	
\$392.63	3724 Executive Center Drive		
Expenditure from corporate funds	Austin, TX 78731		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this sched	<sub>dule)</sub> (b)	Description
EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Payroll Taxes
Complete ONLY if direct expenditure to benefit C/Oh		ffice sought	Office held
Date	Payee name		
11/22/2024	ADP		
Amount (\$)	Payee address; City; State;	Zip Code	
\$723.97	3724 Executive Center Drive		
Expenditure from corporate funds	Austin, TX 78731		
PURPOSE OF	(a) Category (See Categories listed at the top of this sched	<sub>dule)</sub> (b)	Description
EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Payroll Taxes
			ay. o · acces
Complete ONLY if direct	Candidate/Officeholder name Of	ffice sought	Office held
expenditure to benefit C/OI		moo oougm	Cince noid
D-1-			
Date	Payee name		
11/22/2024	ADP		
Amount (\$)		Zip Code	
\$313.04	3724 Executive Center Drive		
Expenditure from			
corporate funds	Austin, TX 78731		
PURPOSE	(a) Category (See Categories listed at the top of this sched	<sub>dule)</sub> (b)	Description
OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Payroll Taxes
			rayiuii iaxes
Complete CNII V if direct	Condidate/Officeholder (12-12-2	ffice occurrent	Office hald
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ffice sought	Office held
,			

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Cabadula F1:	
1 Total pages Schedule F1:	
Sch: 8/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/12/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$978.62	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
<u>'</u>	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Data	
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$528.42	3724 Executive Center Drive
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	• • • • • • • • • • • • • • • • • • •
<u> </u>	
Date	Payee name
11/22/2024	ADP
Amount (\$)	
\$558.27	3724 Executive Center Drive
Evpanditura fra	
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	I ma
OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Taxes
	T dyfoli Tuxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<del>"</del>

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	- Gift/Awards/Memorials Expense Printing Expense Travel Out of District Committee Legal Services Printing Expense 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: 9/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$392.63	3724 Executive Center Drive
- "	
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Payroll Taxes
	Payloli Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$392.63	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Payroll Taxes
	T dyroll Taxes
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/30/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$602.75	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
LA LABITONE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Operation Children	Out lide to 10ff and a lide and a second to the second to
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 -

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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	Il 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: 10/162 Rpt:	Texas Democratic Party 00015831		
4 Date	5 Payee name		
10/30/2024	ADP		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$397.31	3724 Executive Center Drive		
Expenditure from corporate funds	Austin, TX 78731		
8 PURPOSE			
OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Payroll Taxes		
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
10/30/2024	ADP		
Amount (\$)	Payee address; City; State; Zip Code		
\$52.26	3724 Executive Center Drive		
Expenditure from corporate funds	Austin, TX 78731		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor		
	Check if Austin, TX, officeholder living expense		
	Payroll Taxes		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			
Date	Payee name		
10/30/2024	ADP		
Amount (\$)	Payee address; City; State; Zip Code		
\$528.42	3724 Executive Center Drive		
Expenditure from corporate funds	Austin, TX 78731		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor		
	Check if Austin, TX, officeholder living expense		
	Payroll Taxes		
Complete CALL V if direct	Candidate/Officeholder name Office cought Office hold		
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

ng Expense Trav ng Expense Trav ries/Wages/Contract Labor OTH

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: 11/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$558.27	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Taxes
	T dyroll Taxes
Complete CNI V if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
10/30/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$383.89	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	4
Date	Payee name
10/30/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$383.89	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### 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

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: 12/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$428.97	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialiture to benefit C/OI	
Date	Payee name
10/30/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$691.97	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Taxes
	1 dyroll raxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/30/2024	ADP
Amount (\$) \$1,101.18	Payee address; City; State; Zip Code  3724 Executive Center Drive
\$1,101.10	3724 Executive Center Drive
Expenditure from	Avertica TV 70704
corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Taxes
	. 39.53. 133.33
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 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: 13/162 Rpt:	Texas Democratic Party  00015831		
4 Date	5 Payee name		
11/08/2024	ADP		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$34.08	3724 Executive Center Drive		
Expenditure from corporate funds	Austin, TX 78731		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor		
	Check if Austin, TX, officeholder living expense Payroll Processing Fee		
	a dyroll i rocessing i ee		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			
Data			
Date	Payee name		
11/22/2024	ADP		
Amount (\$)	Payee address; City; State; Zip Code		
\$978.62	3724 Executive Center Drive		
Expenditure from			
corporate funds	Austin, TX 78731		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor		
-	Check if Austin, TX, officeholder living expense Payroll Taxes		
	Fayloli Taxes		
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			
Data	Davies warms		
Date 11/08/2024	Payee name ADP		
Amount (\$)	Payee address; City; State; Zip Code		
\$115.53	3724 Executive Center Drive		
Expenditure from			
corporate funds	Austin, TX 78731		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Salaries/Wages/Contract Labor		
	Payroll Processing Fee		
	. ay		
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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solarios (Contract Labor,

Candidate/Officeholder/Politica Credit Card Payment	Il 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: 14/162 Rpt:	Texas Democratic Party 00015831		
4 Date	5 Payee name		
11/22/2024	ADP		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$392.63	3724 Executive Center Drive		
Expenditure from			
corporate funds	Austin, TX 78731		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
	Payroll Taxes		
	T dyfoll Tuxes		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·		
Date	Payee name		
11/22/2024	ADP		
Amount (\$)	Payee address; City; State; Zip Code		
\$292.38	3724 Executive Center Drive		
Ψ232.30	3724 Executive Center Drive		
Expenditure from corporate funds	Austin, TX 78731		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor		
_/	Check if Austin, TX, officeholder living expense		
	Payroll Taxes		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI			
<u> </u>			
Date	Payee name		
11/22/2024	ADP		
Amount (\$)	Payee address; City; State; Zip Code		
\$181.20	3724 Executive Center Drive		
Expenditure from			
corporate funds	Austin, TX 78731		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Salaries/Wages/Contract Labor		
-	Check if Austin, TX, officeholder living expense Payroll Taxes		
	rayioli taxes		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			

#### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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	Al 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: 15/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$402.31	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Payroll Taxes
	rayioli taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$166.04	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$55.85	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H

#### SCHEDULE F1

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

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

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

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

1 Total pages Schedule F1: Sch: 16/162 Rpt: Texas Democratic Party  5 Payee name ADP  6 Amount (\$) Expenditure from corporate funds  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll Taxes	ers)
Sch: 16/162 Rpt:  Texas Democratic Party  00015831  Date 11/22/2024  ADP  7 Payee address; City; State; Zip Code 3724 Executive Center Drive  Austin, TX 78731  Purpose OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if value in, TX, officeholder living expense Payroll Taxes	
ADP  6 Amount (\$) 7 Payee address; City; State; Zip Code 3724 Executive Center Drive  Expenditure from corporate funds  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll Taxes	
6 Amount (\$)	
\$602.75 3724 Executive Center Drive  Expenditure from corporate funds  Austin, TX 78731  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll Taxes	
Expenditure from corporate funds  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll Taxes	
Austin, TX 78731  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll Taxes	
OF EXPENDITURE  Salaries/Wages/Contract Labor    Check if travel outside of Texas. Complete Schedule T.     Check if Austin, TX, officeholder living expense     Payroll Taxes	
EXPENDITURE  Salaries/Wages/Contract Labor  Check if Austin, TX, officeholder living expense  Payroll Taxes	
Payroll Taxes	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Payee name	
11/22/2024 ADP	
Amount (\$) Payee address; City; State; Zip Code	
\$627.97 3724 Executive Center Drive	
Expenditure from	
☐ corporate funds ☐ Austin, TX 78731	
PURPOSE  (a) Category (See Categories listed at the top of this schedule)  (b) Description  (c) Category (See Categories listed at the top of this schedule)	
Salaries/Wages/Contract Labor  EXPENDITURE  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
Payroll Taxes	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Payee name	
11/22/2024 ADP	
Amount (\$) Payee address; City; State; Zip Code	
\$478.69 3724 Executive Center Drive	
Expenditure from	
Corporate funds Austin, TX 78731	
PURPOSE  (a) Category (See Categories listed at the top of this schedule)  (b) Description  (c) Category (See Categories listed at the top of this schedule)  (b) Description	
Salaries/Wages/Contract Labor  EXPENDITURE  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	1
Payroll Taxes	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting 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: 17/162 Rpt:	Texas Democratic Party  00015831		
4 Date	5 Payee name		
11/22/2024	ADP		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$311.09	3724 Executive Center Drive		
Expenditure from corporate funds	Austin, TX 78731		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll Taxes		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
11/22/2024	ADP		
Amount (\$)	Payee address; City; State; Zip Code		
\$98.02	3724 Executive Center Drive		
400.02			
Expenditure from corporate funds	Austin, TX 78731		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense		
	Payroll Taxes		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
11/22/2024	ADP		
Amount (\$)	Payee address; City; State; Zip Code		
\$978.62	3724 Executive Center Drive		
Expenditure from corporate funds	Austin, TX 78731		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll Taxes		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			

#### 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 Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Texas Democratic Party Sch: 18/162 Rpt: 00015831 4 Date Payee name 11/22/2024 ADP 6 Amount (\$) Payee address; City; State; Zip Code \$392.63 3724 Executive Center Drive Expenditure from Austin, TX 78731 corporate funds **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense **Payroll Taxes** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/22/2024 **ADP** Amount (\$) Payee address; City; State; Zip Code \$740.38 3724 Executive Center Drive Expenditure from Austin, TX 78731 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense **Payroll Taxes** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/22/2024 **ADP** Amount (\$) Payee address: City; State; Zip Code \$181.21 3724 Executive Center Drive Expenditure from Austin, TX 78731 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Payroll Taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gitt/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 19/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$389.85	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$428.96	3724 Executive Center Drive
- Formanditure Cons	
Expenditure from corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Taxes
	T dyron raxes
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$392.63	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
D. LIDITORE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
onponential to belieff 0/0	
	11. 0. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.

## SCHEDULE F1

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

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	Il 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: 20/162 Rpt:	Texas Democratic Party 00015831		
4 Date	5 Payee name		
11/22/2024	ADP		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$723.97	3724 Executive Center Drive		
Expenditure from	Austin TV 70721		
corporate funds	Austin, TX 78731		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
	Payroll Taxes		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI	1		
Date	Payee name		
11/22/2024	ADP		
Amount (\$)	Payee address; City; State; Zip Code		
\$76.55	3724 Executive Center Drive		
Expenditure from corporate funds	Austin, TX 78731		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense Payroll Taxes		
	rayion raxes		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			
Date	Payee name		
11/22/2024	ADP		
Amount (\$)	Payee address; City; State; Zip Code		
\$602.75	3724 Executive Center Drive		
Ψ002.73	3724 Exceditive Schief Brive		
Expenditure from corporate funds	Austin, TX 78731		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF	Salaries/Wages/Contract Labor		
EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Payroll Taxes		
Operation Children			
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 -Candidate/Officeholder/Political Committee

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

Credit Card Payment	The Instruction Guide explains how to co		ER (enter a category not issee above)
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer	r ID (Ethics Commission Filers)
Sch: 21/162 Rpt:	Texas Democratic Party		15831
4 Date	5 Payee name	<b>'</b>	
11/22/2024	ADP		
6 Amount (\$)	7 Payee address; City; State; Zip Co	de	
\$627.97	3724 Executive Center Drive		
Expenditure from corporate funds	Austin, TX 78731		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of T	Fexas. Complete Schedule T.
		Payroll Taxes	notice living expense
		.,	
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
expenditure to benefit C/O		<b>y</b> -	
Date	Payon namo		
11/22/2024	Payee name ADP		
		a -	
Amount (\$)	Payee address; City; State; Zip Co	ae	
\$478.69	3724 Executive Center Drive		
Expenditure from corporate funds	Austin, TX 78731		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	<b>—</b>	Texas. Complete Schedule T.
		Check if Austin, TX, officel Payroll Taxes	holder living expense
		rayioli raxes	
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
expenditure to benefit C/O		grit	Office field
Date	Payee name		
11/22/2024	ADP		
Amount (\$)	Payee address; City; State; Zip Co	de	
\$311.10	3724 Executive Center Drive		
Expenditure from			
corporate funds	Austin, TX 78731		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of T	Texas. Complete Schedule T.
		Payroll Taxes	noider maing expense
		,	
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
expenditure to benefit C/O		<b>y</b> -	

#### SCHEDULE F1

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

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

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

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: 22/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$311.09	3724 Executive Center Drive
Expenditure from	Austin, TX 78731
corporate funds	Austin, 17 10131
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$528.42	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Mages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Taxes
	T ayron Taxoo
Complete ONLY if divest	Condidate/Office helder name Office accepts
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
oxportantare to serious ere	
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$504.43	3724 Executive Center Drive
φου 4.40	OTE4 EXCOUNTE SERVE
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
LAFENDITORE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
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 -Candidate/Officeholder/Political Con

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	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: 23/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$558.27	3724 Executive Center Drive
— Foresedit ve from	
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Payroll Taxes
	1 dyroll raxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Davies same
	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$1,101.18	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
_/	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Commission ONII V if disposi	Condidate/Officeholder name Office county
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$392.63	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
LA LADITORL	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONII V If all a	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 -Candidate/Officeholder/Political Committee 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

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

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: 24/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$392.63	3724 Executive Center Drive
Expenditure from	Austin, TX 78731
corporate funds	Austili, 17 10131
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$423.12	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Taxes
	T dyfoll Tuxes
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experientare to benefit ere	•
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$691.97	3724 Executive Center Drive
Ψ031.31	3724 Executive Genter Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITUE	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	-1

#### SCHEDULE F1

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District

Candidate/Officeholder/Political Committee		mmittee Legal Services			OTHER (enter a category not listed above)			
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: 25/162 Rpt:		Texas Democratic Party				00015831	
4	Date	5	Payee name					
	11/22/2024	l	ADP					

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

4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$) \$513.92	7 Payee address; City; State; Zip Code 3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll Taxes
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 11/22/2024	Payee name ADP
Amount (\$) \$505.38	Payee address; City; State; Zip Code  3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll Taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 11/22/2024	Payee name ADP
Amount (\$) \$545.38	Payee address; City; State; Zip Code  3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll Taxes

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 26/162 Rpt:	Texas Democratic Party 00015831
4 Date 11/22/2024	5 Payee name ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$294.88	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll Taxes
Complete ONLY if direct expenditure to benefit C/OR	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$392.63	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll Taxes
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	ADP
Amount (\$) \$505.30	Payee address; City; State; Zip Code 3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll Taxes
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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: 27/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$) \$470.96	7 Payee address; City; State; Zip Code 3724 Executive Center Drive
\$470.90	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Taxes
	T dyfoli Tuxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	-
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$549.63	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense Payroll Taxes
	rayioli raxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	-
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$181.20	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Taxes
	T dyfoli Tuxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<del>1</del>

## 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

Candidate/Officeholder/Politica Credit Card Payment	Il 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: 28/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$311.09	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$545.07	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
On and the ONE Wife diagram	Our didn't lotter had a grant of the second to the second
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$549.63	3724 Executive Center Drive
40.0.00	0.2.1.2.1000
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
D. LIBITORE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Occupations Children	Ora didata (Office hadden granne
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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer
Sch: 29/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$428.97	3724 Executive Center Drive
Ψ+20.31	3724 Executive Genter Brive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll Taxes
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$392.63	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll Taxes
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$723.97	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll Taxes
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

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

Event Expense Lotal Refrese Office C Food/Beverage Expense Polling I Gift/Awards/Memorials Expense Printing Legal Services Salaries

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 comp	elete this form.		
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
Sch: 30/162 Rpt:	Texas Democratic Party	00015831		
4 Date	5 Payee name			
11/22/2024	ADP			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$658.34	3724 Executive Center Drive			
- "				
Expenditure from corporate funds	Austin, TX 78731			
8 PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	) Description		
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		Payroll Taxes		
		,		
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held		
expenditure to benefit C/OI		Sind floid		
Data	D			
Date 11/22/2024	Payee name			
	ADP			
Amount (\$)	Payee address; City; State; Zip Code			
\$52.76	3724 Executive Center Drive			
Expenditure from				
corporate funds	Austin, TX 78731			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense Payroll Taxes		
		rayion raxes		
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sough	t Office held		
expenditure to benefit C/OI		t Office field		
Date	Payee name			
11/22/2024	ADP			
Amount (\$)	Payee address; City; State; Zip Code			
\$602.75	3724 Executive Center Drive			
Expenditure from				
corporate funds	Austin, TX 78731			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.		
LAI LINDITURE		Check if Austin, TX, officeholder living expense		
		Payroll Taxes		
0 1. 6		0"		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held		
5	·			

## SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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
OTHER (outer a extractory not listed above)

Candidate/Officeholder/Politica Credit Card Payment	Il 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: 31/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$545.38	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Dete	
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$545.38	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense Payroll Taxes
	rayioli Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
D-4-	
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$311.10	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
Di Libilone	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Operated Objects "	Our didn't 10ff a halden 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	Committee   Legal Services   Salaries/Wages/Contract Labor   OTHER (enter a category not listed above)			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 32/162 Rpt:	Texas Democratic Party 00015831			
4 Date	5 Payee name			
11/22/2024	ADP			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$549.54	3724 Executive Center Drive			
Expenditure from corporate funds	Austin, TX 78731			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.			
	Check if Austin, TX, officeholder living expense Payroll Taxes			
	T dyfoli faxes			
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI				
Date	Payee name			
11/22/2024	ADP			
Amount (\$)	Payee address; City; State; Zip Code			
\$549.63	3724 Executive Center Drive			
Expenditure from corporate funds	Austin, TX 78731			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE	Check if Austin, TX, officeholder living expense			
	Payroll Taxes			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI	1			
Date	Payee name			
11/22/2024	ADP			
Amount (\$)	Payee address; City; State; Zip Code			
\$549.63	3724 Executive Center Drive			
Ψ549.05	3724 Executive Center Drive			
Expenditure from	A			
corporate funds	Austin, TX 78731			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.			
	Check if Austin, TX, officeholder living expense Payroll Taxes			
	r ayıdı Taxes			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	<b>o</b>			
,				

## SCHEDULE F1

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

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

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 complete this form.			
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 33/162 Rpt:	Texas Democratic Party		00015831
4 Date	5 Payee name		
11/22/2024	ADP		
6 Amount (\$)	7 Payee address; City; State; Zip	Code	
\$311.09	3724 Executive Center Drive		
Expenditure from corporate funds	Austin, TX 78731		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) [	Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	[	Check if travel outside of Texas. Complete Schedule T.
		L	Check if Austin, TX, officeholder living expense
			Payroll Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office s	cought	Office held
expenditure to benefit C/O		ougni	Office field
Dete			
Date	Payee name		
11/22/2024	ADP		
Amount (\$)	Payee address; City; State; Zip	Code	
\$513.92	3724 Executive Center Drive		
Expenditure from			
corporate funds	Austin, TX 78731		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) [	Description
OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Payroll Taxes
			3,75 7655
Complete ONLY if direct	Candidate/Officeholder name Office s	l sought	Office held
expenditure to benefit C/O		3	
Date	Payee name		
11/22/2024	ADP		
Amount (\$)	Payee address; City; State; Zip	Codo	
\$528.42	3724 Executive Center Drive	Code	
Ψ320.42	3724 Executive Genter Drive		
Expenditure from	Auctin TV 70721		
corporate funds	Austin, TX 78731	la.	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) [	Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor	<del> </del>	Check if dustin, TX, officeholder living expense
			Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office s	ought	Office held
expenditure to benefit C/O	Н		

## 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	Il 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: 34/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/12/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$549.63	3724 Executive Center Drive
Expenditure from	A () . TV 70704
corporate funds	Austin, TX 78731
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
12/12/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$473.95	3724 Executive Center Drive
— Foresediture from	
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/12/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$558.27	3724 Executive Center Drive
<del>4000.21</del>	OTET EXOCULTED TO
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EAFENDITUKE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Commission Chill V M alia	Constitute / Office helder 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	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:	
Sch: 35/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$489.69	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
-	Check if Austin, TX, officeholder living expense
	Payroll Taxes
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit 6/01	•
Date	Payee name
12/12/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$392.63	3724 Executive Center Drive
Ψ032.00	OTE4 EXCOUNTE CONTROL BITTO
Expenditure from	A . (C. TV 70704
corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Taxes
	rayioli raxes
0 1: 0.11.7.7.1.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/12/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$460.93	3724 Executive Center Drive
, 133 <b>100</b>	
Expenditure from	Auctin TV 70721
corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Taxes
	rayioii taxes
Occupation Children	Orandidate (Office health a grants
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
onponditure to belieff 0/01	•

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By 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: 36/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/12/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$392.63	3724 Executive Center Drive
\$632.66	6724 Excounte Genici Brive
Expenditure from	
corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<u> </u>
Date	Payee name
12/12/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$545.38	3724 Executive Center Drive
Ψ040.30	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
12/12/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$423.12	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

## 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	Il 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: 37/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$460.93	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$460.93	3724 Executive Center Drive
\$400.93	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ever	
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$505.30	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
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 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: 38/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$) \$505.30	7 Payee address; City; State; Zip Code 3724 Executive Center Drive
Ψ505.50	3724 Executive Genter Brive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll Taxes
	Taylor Taxos
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$505.30	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Taxes
	T dyfoli Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	1
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$81.78	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
-	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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: 39/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$) \$549.63	7 Payee address; City; State; Zip Code 3724 Executive Center Drive
\$549.05	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Payroll Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<del>1</del>
Date	Payee name
12/12/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$691.97	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense Payroll Taxes
	rayioli raxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$545.38	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin TX officeholder living expenses.
	Check if Austin, TX, officeholder living expense Payroll Taxes
	T dyfoli Tuxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<del>'</del>

#### 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: 40/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,101.18	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Taxes
	rayion raxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
·	
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$394.44	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVDENDITUBE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/61	<u>'</u>
Date	Payee name
11/22/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$545.38	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to benefit C/OI	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
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: 41/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$460.93	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Payroll Taxes
	T dyfoli Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
11/05/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$84.37	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	1
OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
11/05/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$978.62	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Payroll Taxes
0 1. 6	
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	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 42/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/05/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$181.21	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense
	Payroll Taxes
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/05/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$402.43	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/05/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$428.97	3724 Executive Center Drive
Ψ420.91	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
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 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 comp	lete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 43/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	·
11/05/2024	ADP	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$723.97	3724 Executive Center Drive	
- Evpanditure from		
Expenditure from corporate funds	Austin, TX 78731	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll Taxes
		rayion raxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	t Office held
expenditure to benefit C/OI		Since Held
Date	Payee name	
11/05/2024	ADP	
Amount (\$)	Payee address; City; State; Zip Code 3724 Executive Center Drive	
\$56.13	3724 Executive Center Drive	
Expenditure from corporate funds	Austin, TX 78731	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll Taxes
		1 dyron ruxes
Complete ONLY if direct	Candidate/Officeholder name Office sought	t Office held
expenditure to benefit C/OI	•	. Since note
Date	Payee name	
11/05/2024	ADP	
Amount (\$) \$602.75	Payee address; City; State; Zip Code 3724 Executive Center Drive	
φ002.73	3724 Executive Center Drive	
Expenditure from corporate funds	Austin, TX 78731	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll Taxes
		1 dyfoli 1 dxe3
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought	t Office held
expenditure to benefit C/O	•	. Office field

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

sement Solicitation/Fundraising Expense

xpense Transportation Equipment & Related Expense
Travel in District
Travel Out of District

abor OTHER (enter a category not listed above)

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: Sch: 44/162 Rpt:	
-	
4 Date	5 Payee name
11/05/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$337.77	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Taxes
	Taylor Tarios
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/05/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$691.97	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/05/2024	Payee name ADP
Amount (\$)	Payee address; City; State; Zip Code
\$45.53	3724 Executive Center Drive
Expenditure from	
corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

## SCHEDULE F1

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

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

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: 45/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/05/2024	ADP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$528.43	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Payroll Taxes
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to benefit C/OI	
Date	Payee name
10/31/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$5,986.46	3724 Executive Center Drive
φο,οσο. 1σ	672 1 Excount Conton Billion
Expenditure from	A
corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payroll Taxes
	T dyfoli Taxes
Commisto ONII V if divest	Condidate/Officeholder neme
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/08/2024	ADP
Amount (\$)	Payee address; City; State; Zip Code
\$130.49	3724 Executive Center Drive
Expenditure from corporate funds	Austin, TX 78731
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule 1.  Check if Austin, TX, officeholder living expense
	Payroll Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<b>U</b>

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 46/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
11/15/2024	ADP	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$5,844.39	3724 Executive Center Drive	
Expenditure from		
corporate funds	Austin, TX 78731	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI	<del>1</del>	
Date	Payee name	
12/06/2024	ADP	
Amount (\$)	Payee address; City; State; Zip Code	
\$126.99	3724 Executive Center Drive	
Expenditure from corporate funds	Austin, TX 78731	
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
		Payroll Processing Fee
		, o
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI	1	
Date	Payee name	
12/13/2024	ADP	
Amount (\$)	Payee address; City; State; Zip Code	
\$4,487.10	3724 Executive Center Drive	
Expenditure from corporate funds	Austin, TX 78731	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
LXI LIBITORE		Check if Austin, TX, officeholder living expense
		Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·	Cilice 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: 47/162 Rpt:	Texas Democratic Party 00015831	
4 Date	5 Payee name	
11/22/2024	ADP	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$130.49	3724 Executive Center Drive	
Expenditure from corporate funds	Austin, TX 78731	
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	
	Payroll Processing Fee	
	T dyron't roccooning t oo	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	1	
Date	Payee name	=
11/27/2024	ADP	
Amount (\$)	Payee address; City; State; Zip Code	_
\$5,312.79	3724 Executive Center Drive	
. ,		
Expenditure from corporate funds	Austin, TX 78731	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Payroll Taxes	
	T dyron Taxoo	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
Date	Payee name	=
12/20/2024	ADP	
Amount (\$)	Payee address; City; State; Zip Code	_
\$123.49	3724 Executive Center Drive	
Ψ123.49	5724 Excodure Center Drive	
Expenditure from corporate funds	Austin, TX 78731	
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.	
EVENDIIOKE	Check if Austin, TX, officeholder living expense	
	Payroll Processing Fee	
0 1. 6		_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	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 -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 B Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 48/162 Rpt:	Texas Democratic Party 00015831	
4 Date	5 Payee name	
12/30/2024	ADP	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$4,487.09	3724 Executive Center Drive	
Expenditure from corporate funds	Austin, TX 78731	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Payroll Taxes	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
11/22/2024	AT&T	
Amount (\$)	Payee address; City; State; Zip Code	
\$110.11	PO BOX 5014	
Expenditure from corporate funds	Carol Stream, IL 60197	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	
LAFENDITORE	Check if Austin, TX, officeholder living expense	
	Telephone	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	Н	
Date	Douge name	
Date	Payee name	
11/05/2024	AT&T	
Amount (\$)	Payee address; City; State; Zip Code	
\$110.11	PO BOX 5014	
Expenditure from	Caral Straam, II, 60107	
corporate funds	Carol Stream, IL 60197	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	
	Check if Austin, TX, officeholder living expense	
	Telephone	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH		

### SCHEDULE F1

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

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

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: 49/162 Rpt:	2 FILER NAME Texas Democratic Party  3 Filer ID (Ethics Commission Filers) 00015831
4 Date 11/10/2024	5 Payee name ActBlue Technical Services
6 Amount (\$) \$3.93  Expenditure from corporate funds  8 PURPOSE OF EXPENDITURE	7 Payee address; City; State; Zip Code  14 Arrow St  Suite 11  Cambridge, MA 02138  (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  Credit Card Processing Fees
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 11/17/2024	Payee name ActBlue Technical Services
Amount (\$) \$7.07  Expenditure from corporate funds  PURPOSE OF EXPENDITURE	Payee address; City; State; Zip Code  14 Arrow St  Suite 11  Cambridge, MA 02138  (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  Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 10/27/2024	Payee name ActBlue Technical Services
Amount (\$) \$27.27  Expenditure from corporate funds  PURPOSE OF EXPENDITURE	Payee address; City; State; Zip Code  14 Arrow St  Suite 11  Cambridge, MA 02138  (a) Category (See Categories listed at the top of this schedule) Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H

### 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 Legal Services 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: 50/162 Rpt:	Texas Democratic Party 00015831	
4 Date	5 Payee name	
10/27/2024	ActBlue Technical Services	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$218.59	14 Arrow St	
	Suite 11	
Expenditure from corporate funds	Cambridge, MA 02138	
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.	
	Credit Card Processing Fees	
	Credit Guita i rocessing i ees	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	<del>-</del>	
Date	Payee name	
11/03/2024	ActBlue Technical Services	
Amount (\$)	Payee address; City; State; Zip Code	
\$796.28	14 Arrow St	
·	Suite 11	
Expenditure from corporate funds	Cambridge, MA 02138	
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	
	Credit Card Processing Fees	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI		
Date	Payee name	
11/24/2024	ActBlue Technical Services	
Amount (\$)	Payee address; City; State; Zip Code	
\$4.33	14 Arrow St	
	Suite 11	
Expenditure from corporate funds	Cambridge, MA 02138	
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	
	Credit Card Processing Fees	
Complete CNII V if direct	Candidate/Officeholder name Office sought Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		

### SCHEDULE F1

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

Fees C Food/Beverage Expense F Gift/Awards/Memorials Expense F

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	-	te this form.
1 Total pages Schedule F1:	·	•	3 Filer ID (Ethics Commission Filers)
Sch: 51/162 Rpt:	Texas Democratic Party		00015831
4 Date	5 Payee name		·
12/01/2024	ActBlue Technical Services		
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode	
\$7.57	14 Arrow St		
	Suite 11		
Expenditure from corporate funds	Cambridge, MA 02138		
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
			Credit Card Processing Fees
			<b>3</b>
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou H	<u>l</u> ught	Office held
Date	Payee name		
12/08/2024	ActBlue Technical Services		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$2.98	14 Arrow St		
	Suite 11		
Expenditure from corporate funds	Cambridge, MA 02138		
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
			Credit Card Processing Fees
			g
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	L Candidate/Officeholder name Office sou H	<u>l</u> ught	Office held
Date	Payee name		
12/15/2024	ActBlue Technical Services		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$5.19	14 Arrow St		
	Suite 11		
Expenditure from corporate funds	Cambridge, MA 02138		
PURPOSE	-	(h)	Description
OF	(a) Category (See Categories listed at the top of this schedule)  Fees	(6)	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	1 003		Check if Austin, TX, officeholder living expense
			 Credit Card Processing Fees
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	Office held
expenditure to benefit C/OI	H		

### 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 Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to cor	plete this form.	OTTIER (effect a category flot listed above	•)
1 Total pages Schedule F1:	•	·	3 Filer ID (Ethics Commission	Filers)
Sch: 52/162 Rpt:	Texas Democratic Party		00015831	
4 Date	5 Payee name			
12/22/2024	ActBlue Technical Services			
6 Amount (\$) \$39.60	7 Payee address; City; State; Zip Coo 14 Arrow St Suite 11	le		
Expenditure from corporate funds	Cambridge, MA 02138			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense Processing Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held	
Date	Payee name			
12/31/2024	ActBlue Technical Services			
Amount (\$)	Payee address; City; State; Zip Cod	le		
\$3.37	14 Arrow St			
— Formanditure from	Suite 11			
Expenditure from corporate funds	Cambridge, MA 02138			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense Processing Fees	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held	
Date	Payee name			
12/29/2024	ActBlue Technical Services			
Amount (\$) \$6.07  Expenditure from corporate funds	Payee address; City; State; Zip Coo 14 Arrow St Suite 11 Cambridge, MA 02138	le		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense Processing Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sout	ht	Office held	

#### SCHEDULE F1

Advertising Expense E Accounting/Banking E Consulting Expense E 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

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: 53/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	Adobe Systems, Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$145.47	345 Park Ave
Expenditure from corporate funds	San Jose, CA 95110
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense  Software
	Sultware
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	H
Date	Payee name
12/20/2024	Adobe Systems, Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$145.47	345 Park Ave
Expenditure from	
corporate funds	San Jose, CA 95110
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Software
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/30/2024	Alcala, Monique
Amount (\$)	Payee address; City; State; Zip Code
\$2,466.18	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EAFENDITUKE	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	

### SCHEDULE F1

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

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/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: 54/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	Alcala, Monique
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,466.18	PO Box 15707
— Foresedit ve from	
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense  Payroll
	i ayron
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	David and the second se
Date	Payee name
11/08/2024	Alcala, Monique
Amount (\$)	Payee address; City; State; Zip Code
\$2,466.18	PO Box 15707
Expenditure from	
corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll
Commission ONLL V if dispose	Condidate/Officeholder name Office county
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/20/2024	Alcala, Monique
Amount (\$)	Payee address; City; State; Zip Code
\$2,466.18	PO Box 15707
Expenditure from	
corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Payroll
Commission Chill V II alling	Condidate/Officeholder name Office county
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	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 -Candidate/Officeholder/Political Commi

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Lenal 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: 55/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/05/2024	Alcala, Monique
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,466.18	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll
	T dyfoli
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Dete	
Date	Payee name
12/20/2024	Almendral, Julie
Amount (\$)	Payee address; City; State; Zip Code
\$1,512.03	PO Box 15707
— Foresaditus from	
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/20/2024	Alt, Daniel
Amount (\$)	Payee address; City; State; Zip Code
\$1,516.31	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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: 56/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
10/30/2024	Alt, Daniel	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$112.00	PO Box 15707	
Expenditure from		
corporate funds	Austin, TX 78761	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	) Description
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Mileage
		Willeage
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI		Cince Hold
Date	Payee name	
12/20/2024	Alvarez, Grecia	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,476.31	PO Box 15707	
\$1,470.51	PO BOX 13707	
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll
		. ayron
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI	9	
Date	Payee name	
11/22/2024	Alvarez, Grecia	
Amount (\$)	Payee address; City; State; Zip Code	
\$96.32	PO Box 15707	
ψ30.0 <u>2</u>	1 G BOX 10101	
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	) Description
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Mileage
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held
- p - 1.13.12 12 20.10.11 3701		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 57/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	·
11/22/2024	Amalgamated Bank	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$180.96	275 Seventh Ave	
Expenditure from		
corporate funds	New York, NY 10001	
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  Bank Fee
		Saint 100
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	t Office held
expenditure to benefit C/OI	1	
Date	Payee name	
11/22/2024	Amalgamated Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$43.52	275 Seventh Ave	
Expenditure from corporate funds	New York, NY 10001	
PURPOSE OF	, (,	Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Bank Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought	t Office held
expenditure to benefit C/OI	1	
Date	Payee name	
11/22/2024	Amalgamated Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$40.16	275 Seventh Ave	
- Evpanditure from		
Expenditure from corporate funds	New York, NY 10001	
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  Bank Fee
		Bunkitee
Complete ONLY if direct	Candidate/Officeholder name Office sought	t Office held
expenditure to benefit C/OI	3	5,1100,11014

### SCHEDULE F1

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

Event Expense Coar Repayment/mental Expens
Foes Office Overhead/Rental Expens
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 58/162 Rpt:	Texas Democratic Party		00015831	
4 Date	5 Payee name		1	
11/05/2024	Amalgamated Bank			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$112.32	275 Seventh Ave			
¥===:0=	2.0 00.0			
Expenditure from corporate funds	New York, NY 10001			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees		el outside of Texas. Com	
		Bank Fee	in, TX, officeholder livin	g expense
		Dank Fee		
O Complete ONLY if direct	Condidate /Officeholder name Office act	aht	Office h	ald
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	gnt	Office II	eiu
Date	Payee name			
11/22/2024	Amalgamated Bank			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$48.00	275 Seventh Ave			
Expenditure from corporate funds	New York, NY 10001			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees		el outside of Texas. Con	nplete Schedule T.
EXPENDITORE			in, TX, officeholder living	g expense
		Bank Fee		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office h	eld
experientare to benefit 6/6				
Date	Payee name			
11/22/2024	Amalgamated Bank			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$4.48	275 Seventh Ave			
Expenditure from corporate funds	New York, NY 10001			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF	Fees (See Categories listed at the top of this schedule)		el outside of Texas. Con	nplete Schedule T.
EXPENDITURE	1 003	Check if Austi	in, TX, officeholder livin	g expense
		Bank Fee		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office h	eld
expenditure to benefit C/O	1			

### 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	al 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: 59/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	Amalgamated Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$38.40	275 Seventh Ave
— Foregoedituus fores	
Expenditure from corporate funds	New York, NY 10001
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  Bank Fee
	Bankree
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
5.	<u> </u>
Date	Payee name
10/29/2024	Amalgamated Bank
Amount (\$)	Payee address; City; State; Zip Code
\$150.75	275 Seventh Ave
— Formanditure from	
Expenditure from corporate funds	New York, NY 10001
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
	Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experience to bettern eye	
Date	Payee name
11/27/2024	Amalgamated Bank
Amount (\$)	Payee address; City; State; Zip Code
\$578.95	275 Seventh Ave
Expenditure from corporate funds	New York, NY 10001
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
EXPENDITORE	Check if Austin, TX, officeholder living expense  Bank Fee
	Bank Fee
Complete <u>ONLY</u> if direct	Candidate/Officeholder name  Office sought  Office held
	Candidate/Officeholder name  Office sought  Office held
Complete <u>ONLY</u> if direct	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Al 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: 60/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/30/2024	Amalgamated Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$21.25	275 Seventh Ave
Expenditure from corporate funds	New York, NY 10001
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
	Bank Fee
	Banki ee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	
·	
Date	Payee name
10/29/2024	Amalgamated Bank
Amount (\$)	Payee address; City; State; Zip Code
\$48.00	275 Seventh Ave
Expenditure from corporate funds	New York, NY 10001
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
	Bank Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
12/30/2024	Amalgamated Bank
Amount (\$)	Payee address; City; State; Zip Code
\$23.25	275 Seventh Ave
Φ23.25	275 Seventin Ave
Expenditure from	
corporate funds	New York, NY 10001
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  Bank Fee
	вапк нее
Commission ONE VIII II	Condidate/Officeholder norse
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
and a section of the	

### 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	Il 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: 61/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/27/2024	Amalgamated Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$16.00	275 Seventh Ave
— Foresteller of forest	
Expenditure from corporate funds	New York, NY 10001
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  Bank Fee
	Banki ee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
11/22/2024	Amazon.com
Amount (\$)	Payee address; City; State; Zip Code
\$43.97	PO Box 80463
Expenditure from corporate funds	Seattle, WA 98108
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorure to benefit C/O	
Date	Payee name
11/22/2024	Amazon.com
Amount (\$)	Payee address; City; State; Zip Code
\$29.88	PO Box 80463
Expenditure from corporate funds	Seattle, WA 98108
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare 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 Con-

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: 62/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	Amazon.com
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3.32	PO Box 80463
Expenditure from	
corporate funds	Seattle, WA 98108
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Office Supplies
	Office Supplies
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Dougo nomo
11/22/2024	Payee name
,,	Amazon.com
Amount (\$)	Payee address; City; State; Zip Code
\$96.30	PO Box 80463
Expenditure from	
corporate funds	Seattle, WA 98108
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Subscription
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
D-4-	
Date	Payee name
11/22/2024	Amazon.com
Amount (\$)	Payee address; City; State; Zip Code
\$6.15	PO Box 80463
Expenditure from	
corporate funds	Seattle, WA 98108
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Office Supplies
	Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

### SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	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: 63/162 Rpt:	Texas Democratic Party		00015831		
4 Date	5 Payee name				
11/22/2024	Amazon.com				
6 Amount (\$)	7 Payee address; City; State; Zip C	Code			
\$42.93	PO Box 80463				
Expenditure from corporate funds	Seattle, WA 98108				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription		
OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Comple		
			] Check if Austin, TX, officeholder living e ffice Supplies	xpense	
			писс Эфрисэ		
9 Complete ONLY if direct	Candidate/Officeholder name Office so	 ought	Office held	1	
expenditure to benefit C/O		Jugiit	Cilioc Heik	•	
Date	Payee name				
11/07/2024	American Printing & Mailing				
Amount (\$)	Payee address; City; State; Zip C	Codo			
\$3,459.49	1606 Headway Circle, #100	Joue			
φ5,459.49	1000 Headway Circle, #100				
Expenditure from corporate funds	Austin, TX 78754				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription		
OF EXPENDITURE	Printing Expense		Check if travel outside of Texas. Comple Check if Austin, TX, officeholder living e		
		L	ailing	xperise	
			<del></del> 9		
Complete ONLY if direct	Candidate/Officeholder name Office so	L ought	Office held	<u> </u>	
expenditure to benefit C/O	1	-	Education Place		
Date	Payee name				
12/20/2024	Aramino, Marisela				
Amount (\$)	Payee address; City; State; Zip C	Code			
\$1,642.36	PO Box 15707	2000			
, , , ,					
Expenditure from corporate funds	Austin, TX 78761				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	<b>(b)</b> De	escription		
OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Comple		
		L	Check if Austin, TX, officeholder living e	xpense	
		'	xy. •		
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	 ought	Office held	<u> </u>	
expenditure to benefit C/O			J55 Hold		

### 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/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to co	omplete this form.  OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 64/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
10/30/2024	Aramino, Marisela	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$115.20	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense  Mileage
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	Office held
expenditure to benefit C/OI		
Date	Payee name	
10/30/2024	Arango, Alejandro	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$1,338.51	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Payroll
Commission ONII V if direct	Candidate/Officeholder name Office sou	Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ight Office held
Date	Payee name	
11/08/2024	Arango, Alejandro	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$1,396.22	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll
		i ayıon
Complete ONLY if direct	Candidate/Officeholder name Office sou	ight Office held
expenditure to benefit C/OI		

### SCHEDULE F1

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

Fees Office C
Food/Beverage Expense Polling I
Gift/Awards/Memorials Expense Printing
Legal Services Salaries

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: 65/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
11/22/2024	Arango, Alejandro	
6 Amount (\$)	7 Payee address; City; State; Zip Code	9
\$1,396.22	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
8 PURPOSE		D) Description
OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/ Wages/ Solitatic East	Check if Austin, TX, officeholder living expense
		Payroll
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O	1	
Date	Payee name	
10/30/2024	Arango, Alejandro	
Amount (\$)	Payee address; City; State; Zip Code	9
\$122.88	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
OF	Travel In District	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Mileage
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt Office held
experientare to serious eye.		
Date	Payee name	
10/30/2024	Arango, Alejandro	
Amount (\$)	Payee address; City; State; Zip Code	9
\$126.72	PO Box 15707	
Expenditure from		
corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Mileage
Complete CNII V if direct	Condidate/Officeholder name	nt Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	it Office neta

### 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: 66/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	Asana
6 Amount (\$) \$276.10	7 Payee address; City; State; Zip Code 1550 Bryant St
Expenditure from corporate funds	San Francisco, CA 94103
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Software
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/20/2024	Ayala, Daniel
Amount (\$)	Payee address; City; State; Zip Code
\$1,476.31	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	BackDraft Pizzeria
Amount (\$)	Payee address; City; State; Zip Code
\$83.48	10001 Metric Blvd
Expenditure from corporate funds	Austin, TX 78758
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

#### 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: 67/162 Rpt:	Texas Democratic Party 00015831
4 Date	
	Taylor Hamo
10/30/2024	Beam Dental Group
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$867.17	226 N 5th St Ste 400
Expenditure from	Columbus OLI 4221E
corporate funds	Columbus, OH 43215
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EX. ENDITORE	Check if Austin, TX, officeholder living expense
	Health Insurance
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<del>-</del>
Data	
Date	Payee name
11/22/2024	Beam Dental Group
Amount (\$)	Payee address; City; State; Zip Code
\$469.56	226 N 5th St Ste 400
, , , , , ,	
Expenditure from	
corporate funds	Columbus, OH 43215
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Health Insurance
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
_	
Date	Payee name
11/22/2024	Beam Dental Group
Amount (\$)	Payee address; City; State; Zip Code
\$1,281.57	226 N 5th St Ste 400
Expenditure from	Only 1997 OLI 40045
corporate funds	Columbus, OH 43215
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
LAI LINDITURE	Check if Austin, TX, officeholder living expense
	Health Insurance
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<b>⊣</b>

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

vertising Expense
counting/Banking

Event Expense
Counting/Banking

Event Expense
Counting/Banking

Event Expense
Coffice Overhead/Rental Expense

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

Fees Office Overhead/r
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wages/C

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: 68/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	Blue Cross Blue Shield
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$12,813.08	PO Box 731428
Expenditure from corporate funds	Dallas, TX 75266
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
_/	Check if Austin, TX, officeholder living expense
	Health Insurance
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	Blue Cross Blue Shield
Amount (\$)	Payee address; City; State; Zip Code
\$18,707.20	PO Box 731428
Expenditure from corporate funds	Dallas, TX 75266
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Health Insurance
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/28/2024	Blue Nation Strategies
Amount (\$)	Payee address; City; State; Zip Code
\$36,843.40	2841 Smith Ave
·	
Expenditure from corporate funds	Baltimore, MD 21209
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense  Mailing
	ivialiiriy
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
	State Representative District 112

### 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: 69/162 Rpt:	Texas Democratic Party		00015831		
4	Date	5 Payee name	•			
	10/28/2024	Blue Nation Strategies				
6	Amount (\$)	7 Payee address; City; State; Zip Code	:			
	\$37,404.00	2841 Smith Ave				
	- Consoditors from					
L	Expenditure from corporate funds	Baltimore, MD 21209				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	) Description			
	OF EXPENDITURE	Printing Expense	Check if travel out	side of Texas. Comp		
	LXI LIIDITORE		<b>—</b>	X, officeholder living	expense	
			Mailing			
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	+	Office he	Id	
9	expenditure to benefit C/O		esentative District		iu	
	5.					
	Date	Payee name				
	10/28/2024	Blue Nation Strategies				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$38,525.20	2841 Smith Ave				
	Expenditure from corporate funds	Baltimore, MD 21209				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	) Description			
	OF EXPENDITURE	Printing Expense	_	side of Texas. Comp	olete Schedule T.	
	EXPENDITORE		ш	X, officeholder living	expense	
			Mailing			
	Complete ONLY if direct	Condidate/Officeholder reges		Office he	lal	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough Bishop, Averie State Repre	ι esentative District		iu	
				. 112		
	Date	Payee name				
	10/28/2024	Blue Nation Strategies				
	Amount (\$)	Payee address; City; State; Zip Code	•			
	\$12,917.25	2841 Smith Ave				
_	T Expenditure from					
L	corporate funds	Baltimore, MD 21209				
	PURPOSE OF	,	) Description			
	EXPENDITURE	Printing Expense		side of Texas. Comp X, officeholder living		
			Mailing	A, officeriolaer living	САРСПОС	
			3			
	Complete ONLY if direct	Candidate/Officeholder name Office sough	t	Office he	ld	
	expenditure to benefit C/O		rict Tarrant Cty			

### 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: 70/162 Rpt:	Texas Democratic Party 00015831	
4 Date	5 Payee name	
10/28/2024	Blue Nation Strategies	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$12,917.25	2841 Smith Ave	
Expenditure from corporate funds	Baltimore, MD 21209	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Mailing	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	H McGinty, Robert Constable District Pct 2 Constable District Pct 2	
Date	Payee name	
10/28/2024	Blue Nation Strategies	
Amount (\$)	Payee address; City; State; Zip Code	
\$25,834.52	2841 Smith Ave	
Expenditure from corporate funds	Baltimore, MD 21209	
PURPOSE		
OF	(a) Category (See Categories listed at the top of this schedule)  Printing Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Mailing	
Commiste ONII V if direct	Candidate/Officeholder name Office sought Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		
D-1-		_
Date 10/28/2024	Payee name Blue Victory Communications	
Amount (\$) \$15,205.89	Payee address; City; State; Zip Code PO Box 300624	
Ψ10,200.09	1.0.000.000027	
Expenditure from corporate funds	Austin, TX 78703	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Mailing	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	H Burkholz, Jennie State Representative District 52	

### SCHEDULE F1

The straining Expense Event Expense Event Expense Loan Repayment/Reimbur Community Com

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

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: 71/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/20/2024	Bost, Richard
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,554.98	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Payroll
	T dyfoli
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
11/22/2024	Bost, Richard
Amount (\$)	Payee address; City; State; Zip Code
\$58.88	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Travel In District Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Mileage
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	4
Date	Payee name
11/08/2024	Bowen, Jordan
Amount (\$)	Payee address; City; State; Zip Code
\$897.28	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/wages/contract Labor
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### 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

g Expense Travel in Distric gg Expense Travel Out of Di es/Wages/Contract Labor OTHER (enter a

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services	Salaries	-	Contract Labor		OTHER (enter a	category not listed above)	
	oroun ouru r uymone		The Instruction Gu	ide explains how to	comple	te this form.				
1	Total pages Schedule F1:	2 FILER NAME	Ξ				3	Filer ID	(Ethics Commission File	rs)
	Sch: 72/162 Rpt:	Texas Dem	ocratic Party					00015831		
4	Date	5 Payee name								
	12/20/2024	Bowen, Jor	dan							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip (	Code					
	\$1,476.31	PO Box 15	707							
	Expenditure from corporate funds	Austin, TX	78761							
8	PURPOSE	(a) Category (S	ee Categories listed at th	e top of this schedule)	(b)	Description				
	OF EXPENDITURE		ages/Contract La			<b>=</b>			plete Schedule T.	
	EXI ENDITORE					<b>—</b>	, TX	officeholder living	g expense	
						Payroll				
_	0 1: 0: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1:			0.00	<u> </u>			O.W. 1		
9	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office so	ougni			Office h	eia	
_	Data	D								
	Date 11/22/2024	Payee name Bowen, Jor								
_				Ctata: 7ia (						
	Amount (\$)	Payee addre	•	State; Zip (	Joue					
	\$1,776.01	PO Box 15	707							
	Expenditure from	Accession TV	70701							
L	corporate funds	Austin, TX								
	PURPOSE OF		ee Categories listed at th		(b)	Description	ata	de of Toyon Com	mlete Cebedule T	
	EXPENDITURE	Salaries/Wa	ages/Contract La	bor		<b>=</b>		officeholder livin	plete Schedule T. g expense	
						Payroll				
	Complete ONLY if direct	Candidate/Off	iceholder name	Office so	ought			Office h	eld	
	expenditure to benefit C/OH	4								
	Date	Payee name								
	10/30/2024	Bowen, Jor								
	Amount (\$)	Payee addre	ess; City;	State; Zip (	Code					
	\$97.92	PO Box 15	-	, ,						
	·									
	Expenditure from corporate funds	Austin, TX	78761							
	PURPOSE				(h)	Description				
	OF	Travel In D	ee Categories listed at th	e top of this schedule)	(2)		outs	de of Texas. Con	plete Schedule T.	
	EXPENDITURE					Check if Austin,	, TX	officeholder living	g expense	
					1	Mileage				
						·····ougo				
	Complete ONLY if direct expenditure to benefit C/Oł		iceholder name	Office so				Office h	eld	

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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	Il 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: 73/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	Brannon, William E
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$823.53	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense  Payroll
	1 ayron
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/08/2024	Brannon, William E
Amount (\$)	Payee address; City; State; Zip Code
\$831.23	PO Box 15707
- Funanditura from	
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ever	
Date	Payee name
11/22/2024	Brannon, William E
Amount (\$)	Payee address; City; State; Zip Code
\$831.21	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare 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 Commit

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: 74/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/05/2024	Brannon, William E
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$839.53	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/30/2024	Caballero, Roberto
Amount (\$)	Payee address; City; State; Zip Code
\$1,124.25	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/08/2024	Caballero, Roberto
Amount (\$)	Payee address; City; State; Zip Code
\$1,140.24	PO Box 15707
Φ1,140.24	PO BOX 13707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
LAI LINDITORE	Check if Austin, TX, officeholder living expense
	Payroll
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 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 F	-ilers)
Sch: 75/162 Rpt:	Texas Democratic Party 00015831	
4 Date	5 Payee name	
11/22/2024	Caballero, Roberto	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,140.24	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	
	Check if Austin, TX, officeholder living expense  Payroll	
	r ayıoli	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
Date	Payee name	
12/20/2024	Caballero, Roberto	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,140.25		
Ψ1,140.23	FO BOX 13707	
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	
	Check if Austin, TX, officeholder living expense  Payroll	
	r ayıoli	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
Date	Payee name	
11/05/2024	Caballero, Roberto	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,140.25		
, _,_ · · · · <b>_ ·</b>		
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Payroll	
Complete CAU V Station	Condidate/Officeholder name Office appropri	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	

### 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 co	nplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Com	mission Filers)
Sch: 76/162 Rpt:	Texas Democratic Party		00015831	
4 Date	5 Payee name			
12/20/2024	Cain-Williams, Lauren			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$1,476.31	PO Box 15707			
7-,				
Expenditure from corporate funds	Austin, TX 78751			
<u> </u>		/I-X		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	outside of Texas. Complete Schedule	т
EXPENDITURE	Salaries/Wages/Contract Labor		, TX, officeholder living expense	
		Payroll		
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held	
expenditure to benefit C/O	1			
Date	Payee name			
10/30/2024	Cain-Williams, Lauren			
Amount (\$)	Payee address; City; State; Zip Co			
\$132.48	PO Box 15707			
Ψ102110	TO BOX 10101			
Expenditure from	Auctin TV 707E1			
corporate funds	Austin, TX 78751			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	outside of Toyas, Complete Schodule	<del>.</del>
EXPENDITURE	Travel In District	ш	outside of Texas. Complete Schedule , TX, officeholder living expense	1.
		Ш Mileage		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held	
expenditure to benefit C/O	1			
Date	Payee name			
10/30/2024	Campaign Verify			
Amount (\$)	Payee address; City; State; Zip Co			
\$60.80	8605 Westwood Center Dr, Suite 505			
Ψ00.00	2330 Westiness Conton Dr., Cutte 500			
Expenditure from	Vianna VA 22102			
corporate funds	Vienna, VA 22182			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	outside of Texas. Complete Schedule	T
EXPENDITURE	Office Overhead/Rental Expense		, TX, officeholder living expense	1.
		Subscription	, , , , , , , , , , , , , , , , , , ,	
		·		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held	
expenditure to benefit C/O				

### 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

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: 77/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/20/2024	Campbell, Emma
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,476.31	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense  Payroll
	rayioli
O Complete CNU V if all	Condidate/Officeholder name
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/30/2024	Campbell, Emma
Amount (\$)	Payee address; City; State; Zip Code
\$112.00	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Data	Davies same
Date	Payee name
11/22/2024	Canva Inc
Amount (\$)	Payee address; City; State; Zip Code
\$8.31	2 Lacey St
Expenditure from	
corporate funds	Sydney Australia
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Subscription
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

#### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

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/Officenoider/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: 78/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/20/2024	Canva Inc
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$8.31	2 Lacey St
— Foreseditors from	
Expenditure from corporate funds	Sydney Australia
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Subscription
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/30/2024	Carpenter, Karen B.
Amount (\$)	Payee address; City; State; Zip Code
\$1,436.98	PO Box 15707
Ψ1,430.30	1 O Box 13707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Payroll
	T ASTON
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	· ·
Date	Dougo nama
11/08/2024	Payee name Carpenter, Karen B.
	•
Amount (\$) \$1,452.97	Payee address; City; State; Zip Code PO Box 15707
Φ1,452.9 <i>1</i>	PO BOX 13707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense  Payroll
	Fayioii
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

#### SCHEDULE F1

The straining Expense Event Expense Event Expense Loan Repayment/Reimbur Community Com

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

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: 79/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	
11/22/2024	Carpenter, Karen B.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,452.98	PO Box 15707
— Formanditura from	
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
12/20/2024	Carpenter, Karen B.
Amount (\$)	Payee address; City; State; Zip Code
\$1,452.97	PO Box 15707
Ψ1,432.91	FO BOX 13707
Expenditure from	
corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll
Operation ONLY if allowed	On all data (Office health a group of the seconds)
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/05/2024	Carpenter, Karen B.
Amount (\$)	Payee address; City; State; Zip Code
\$1,452.97	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Salarias (Magas/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

#### SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Lead Services Salaries/Wages/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment	Il 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: 80/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	Caughman, Carla
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,338.51	PO Box 15707
Expenditure from	Averting TV 70764
corporate funds	Austin, TX 78761
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
11/08/2024	Caughman, Carla
Amount (\$)	Payee address; City; State; Zip Code
\$1,396.22	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin TX officeholder living expanse.
	Check if Austin, TX, officeholder living expense  Payroll
	T ASTON
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/22/2024	Caughman, Carla
Amount (\$)	Payee address; City; State; Zip Code PO Box 15707
\$1,382.46	PO BOX 13707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

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: 81/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	Caughman, Carla
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$66.34	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Mileage
	ivilicage
O Complete ONLY if direct	Candidate/Officeholder name Office acusht
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	Celis Brewery
Amount (\$)	Payee address; City; State; Zip Code
\$43.49	10001 Metric Blvd
Expenditure from corporate funds	Austin, TX 78758
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Food
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<del>-</del>
Date	Payee name
10/31/2024	Cham, Ashley J
Amount (\$)	Payee address; City; State; Zip Code
\$2,391.84	PO Box 15707
Ψ2,001.04	
Expenditure from	Auctin TV 70761
corporate funds	Austin, TX 78761
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll
	. 33.5
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

### 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: 82/162 Rpt:	Texas Democratic Party 00015831	
4 Date	5 Payee name	
11/15/2024	Cham, Ashley J	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$2,391.83	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF EXPENDITURE	Salaries/Wages/Contract Labor	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Payroll	
O Committee ONII V if allowed	Out distance (Office health and a second to the control of the con	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
·		_
Date	Payee name	
12/13/2024	Cham, Ashley J	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,391.84	PO Box 15707	
Funanditura from		
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	
	Check if Austin, TX, officeholder living expense  Payroll	
	T dyron	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·	
Date	Payee name	_
11/27/2024	Cham, Ashley J	
	-	
Amount (\$)	Payee address; City; State; Zip Code PO Box 15707	
\$2,391.83	PO BOX 15707	
Expenditure from		
corporate funds	Austin, TX 78761	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Payroll	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·	
		_

### SCHEDULE F1

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

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

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

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 83/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
12/27/2024	Cham, Ashley J	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$2,391.84	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight Office held
experience to benefit ever		
Date	Payee name	
11/22/2024	Chevron	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$30.94	201 Del Rio St	
Expenditure from corporate funds	Ozona, TX 76943	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Fuel
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight Office held
experiorities to benefit C/OI	1	
Date	Payee name	
11/22/2024	Circle K	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$30.09	Gulf Coast Region	
	12911 N. Telecom Parkway	
Expenditure from corporate funds	Temple Terrace, FL 33637	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Travel In District	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Travor in Biothiot	Check if Austin, TX, officeholder living expense
		Fuel
Complete ONLY if direct	Candidate/Officeholder name Office sou	ight Office held
expenditure to benefit C/OI	1	

### SCHEDULE F1

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

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	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 84/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	<u> </u>
11/22/2024	City of Brownsville	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de
\$5.12	1001 E Elizabeth Street	
Expenditure from corporate funds	Brownsville, TX 78520	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	PARKING	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Parking
		1 diking
9 Complete ONLY if direct	Candidate/Officeholder name Office soug	aht Office held
expenditure to benefit C/OI		onice field
Data		
Date 11/22/2024	Payee name Cloudflare	
Amount (\$)	Payee address; City; State; Zip Coc	de
\$10.23	101 Townsend	
Expenditure from corporate funds	San Francisco, CA 94107	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	,	Check if Austin, TX, officeholder living expense
		Software
		25
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght Office held
'		
Date	Payee name	
11/22/2024	Cognito	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$9.60	929 Gervais St, Suite D	
Expenditure from		
corporate funds	Columbia, SC 29201	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Subscription
		Cassonphon
Complete ONLY if direct	Candidate/Officeholder name Office soug	aht Office held
expenditure to benefit C/OI		Gince Held

### 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

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	o complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 85/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
10/29/2024	Convergence Targeted Communications	
6 Amount (\$)	7 Payee address; City; State; Zip	Code
\$21,148.29	1221 Connecticut Ave NW, Suite 300	
Expenditure from corporate funds	Washington, DC 20036	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Mailing
		Maining
9 Complete ONLY if direct	Candidate/Officeholder name Office	sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	1	Representative District 101 State Representative District
	Turrier, Criris State	Representative District 101 State Representative District
Date	Payee name	
11/06/2024	Convergence Targeted Communications	
Amount (\$)	Payee address; City; State; Zip	Code
\$4,331.58	1221 Connecticut Ave NW, Suite 300	
Expenditure from corporate funds	Washington, DC 20036	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Mailing
One of the ONE Wife disease	O and in the Office In all any area	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	1	sought Office held
·	<sup>1</sup> Turney, Chris State	Representative District 101 State Representative District
Date	Payee name	
11/06/2024	Convergence Targeted Communications	
Amount (\$)	Payee address; City; State; Zip	Code
\$61,328.27	1221 Connecticut Ave NW, Suite 300	
Expenditure from corporate funds	Washington, DC 20036	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Mailing
		waming
Commission ONII V if diment	Condidate/Office helder name	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	1	Sought Office held
	<sup>1</sup> Turner, Chris State	Representative District 101 State Representative District

#### SCHEDULE F1

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

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: 86/162 Rpt:	Texas Democratic Party 00015831
·	
4 Date	5 Payee name
10/30/2024	Corbitt, Drew
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$0.20	PO Box 15707
,,,_,	
Expenditure from	A . C . TV 70704
corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
10/30/2024	Cruz, Brenda
Amount (\$)	Payee address; City; State; Zip Code
\$1,716.33	PO Box 15707
Expenditure from	
corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/08/2024	Cruz, Brenda
Amount (\$)	Payee address; City; State; Zip Code
\$1,716.32	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
	1
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll
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 Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

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: 87/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	Cruz, Brenda
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,716.33	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense  Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/20/2024	Cruz, Brenda
Amount (\$)	Payee address; City; State; Zip Code
\$1,716.32	PO Box 15707
·	
Expenditure from corporate funds	Austin, TX 78761
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll
	T ayron
Complete <u>ONLY</u> if direct expenditure to benefit C/O	L Candidate/Officeholder name Office sought Office held H
Date	Payee name
11/05/2024	Cruz, Brenda
Amount (\$)	Payee address; City; State; Zip Code
\$1,716.33	PO Box 15707
,-,,	
Expenditure from corporate funds	Austin, TX 78761
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin TX officeholder living evennes.
	Check if Austin, TX, officeholder living expense  Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

#### SCHEDULE F1

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

Fees Office Overheat
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expens
Legal Services Salaries/Wages

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarise Wagnes/Contract Labor

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: 88/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/31/2024	Dones, Jason
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,890.55	PO Box 15707
— Consenditure from	
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll
	. 33.0
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/15/2024	Dones, Jason
Amount (\$)	Payee address; City; State; Zip Code
\$1,890.54	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense  Payroll
	1 ayron
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/31/2024	Doody, Dylan
Amount (\$)	Payee address; City; State; Zip Code
\$3,079.84	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Oranghi Olivia	
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	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: 89/162 Rpt:	Texas Democratic Party 00015831	
4 Date	5 Payee name	
11/15/2024	Doody, Dylan	
6 Amount (\$) \$3,079.83	7 Payee address; City; State; Zip Code PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll	
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
12/13/2024	Doody, Dylan	
Amount (\$)	Payee address; City; State; Zip Code	
\$3,079.83	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll	
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	=
11/27/2024	Doody, Dylan	
Amount (\$)	Payee address; City; State; Zip Code	
\$3,079.84	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll	
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	

### SCHEDULE F1

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

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

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 File	ers)
Sch: 90/162 Rpt:	Texas Democratic Party 00015831	
4 Date	5 Payee name	
12/27/2024	Doody, Dylan	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$3,079.84	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
8 PURPOSE		
OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Payroll	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experialiture to benefit C/O	"1	
Date	Payee name	
11/22/2024	Drivestrike	
Amount (\$)	Payee address; City; State; Zip Code	
\$3.46	333 S 520W, Suite 180	
Expenditure from corporate funds	Lincoln, NE 84042	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense  Software	
	- Column o	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
Date	Payee name	
11/22/2024	Easy Tiger	
Amount (\$)	Payee address; City; State; Zip Code	
\$146.13	6406 N IH-35 Suite 1100	
Ψ1-0.10	O 135 TEN 135 Guillo 1100	
Expenditure from	Auctin TV 707E2	
corporate funds	Austin, TX 78752	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)    Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Food	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	PH	

### SCHEDULE F1

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

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

Expense Travel

Expense Travel

6/Wages/Contract Labor OTHER

Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/ The Instruction Guide explains how to co	Wages/Contract Labor OTHER (enter a category not listed above)  omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 91/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
11/22/2024	Easy Tiger	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$182.11	6406 N IH-35 Suite 1100	
Expenditure from corporate funds	Austin, TX 78752	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food
		1 000
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office soil	ught Office held
Date	Payee name	
11/22/2024	Enterprise Rent-A-Car	
Amount (\$)	Payee address; City; State; Zip C	ode
\$62.90	4210 S Congress Ave	
Expenditure from corporate funds	Austin, TX 78701	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Transportation
		Transportation
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soil	Lught Office held
Date	Payee name	
11/22/2024	Enterprise Rent-A-Car	
Amount (\$)	Payee address; City; State; Zip C	ode
\$85.49	4210 S Congress Ave	
Expenditure from corporate funds	Austin, TX 78701	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Transportation
Complete ONLY if allow	Condidate/Officeholder regree	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soil	ught 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	Al 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: 92/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	EveryAction Inc
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$20,467.20	655 15th St NW, Suite 650
Expenditure from corporate funds	Washington, DC 20005
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
_/	Check if Austin, TX, officeholder living expense
	Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H
Date	Payee name
10/30/2024	EveryAction Inc
Amount (\$)	Payee address; City; State; Zip Code
\$20,467.20	655 15th St NW, Suite 650
Expenditure from corporate funds	Washington, DC 20005
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Software
	Software
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
11/22/2024	Federal Express
Amount (\$)	Payee address; City; State; Zip Code
\$8.26	3610 Hacks Cross Rd
Expenditure from corporate funds	Memphis, TN 38125
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense Shipping
	Snipping
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

### 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	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: 93/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	Federal Express
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$8.39	3610 Hacks Cross Rd
- Evpanditura from	
Expenditure from corporate funds	Memphis, TN 38125
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Shipping
	Shipping
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Dete	
Date	Payee name
11/22/2024	Federal Express
Amount (\$)	Payee address; City; State; Zip Code
\$11.40	3610 Hacks Cross Rd
Expenditure from	
corporate funds	Memphis, TN 38125
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXI ENDITORE	Chicagina Check if Austin, TX, officeholder living expense
	Shipping
Commission ONII V if dispose	Condidate/Officeholder name Office sought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	Federal Express
Amount (\$)	Payee address; City; State; Zip Code
\$70.77	3610 Hacks Cross Rd
Expenditure from	
corporate funds	Memphis, TN 38125
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Shipping
Operation Children	On didn't 10 ff a balden name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	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 -Candidate/Officeholder/Political Com

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 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: 94/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	Feistauer, Isabella
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$274.83	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Payroll
	1 dyfoli
O Consulate ONII V if dispert	Occasional Office health and the second of t
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/08/2024	Feistauer, Isabella
Amount (\$)	Payee address; City; State; Zip Code
\$247.05	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	Feistauer, Isabella
Amount (\$)	Payee address; City; State; Zip Code
\$335.71	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

### SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAME	3	3 Filer ID	(Ethics Commission Filers)
Sch: 95/162 Rpt:	Texas Democratic Party		00015831	
4 Date	5 Payee name	L		
12/20/2024	Feistauer, Isabella			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$233.75	PO Box 15707			
Expenditure from corporate funds	Austin, TX 78761			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel ou	ıtside of Texas. Comp	
LXI LINDITORE		<b>—</b>	ΓX, officeholder living	expense
		Payroll		
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office he	ld.
expenditure to benefit C/O		gnt	Office fie	iu
Data				
Date 11/05/2024	Payee name Feistauer, Isabella			
	, , , , , , , , , , , , , , , , , , ,			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$255.37	PO Box 15707			
Expenditure from corporate funds	Austin, TX 78761			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel ou	ıtside of Texas. Comp	
LAFENDITORE			ΓX, officeholder living	expense
		Payroll		
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	aht	Office he	ld.
expenditure to benefit C/O		giit	Office fic	iu
Data				
Date 12/03/2024	Payee name First National Bank of Omaha			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$497.96	14010 FNB Pkwy			
Expenditure from corporate funds	Omaha, NE 68154			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Credit Card Payment		ıtside of Texas. Comp	olete Schedule T.
LXI LINDITORE			TX, officeholder living	expense
		Credit Card Pa	ауппепі	
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office ha	ld.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ynt	Office he	iu
•				

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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: 96/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/03/2024	First National Bank of Omaha
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$275.16	14010 FNB Pkwy
Expenditure from corporate funds	Omaha, NE 68154
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	Credit Card Payment
	Great Sara Laymont
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
11/22/2024	Flying J Inc
Amount (\$)	Payee address; City; State; Zip Code
\$19.88	1104 Country Hills Dr
Expenditure from corporate funds	Ogden, UT 84403
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Travel In District Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Fuel
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	4
Date	Payee name
11/22/2024	Flying J Inc
Amount (\$)	Payee address; City; State; Zip Code
\$14.90	1104 Country Hills Dr
Expenditure from corporate funds	Ogden, UT 84403
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Fuel
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 Event 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

Credit Card Payment	The Instruction Guide explains how to co	omplete t	this form.	,
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Eth	nics Commission Filers)
Sch: 97/162 Rpt:	Texas Democratic Party		00015831	
4 Date	5 Payee name		•	
11/22/2024	Flying J Inc			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$2.77	1104 Country Hills Dr			
Expenditure from				
corporate funds	Ogden, UT 84403			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	<b>(b)</b> De	escription	
OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete S	
		L	Check if Austin, TX, officeholder living exper	nse
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held	
expenditure to benefit C/O		-		
Date	Payee name			
11/22/2024	Flying J Inc			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$10.09	1104 Country Hills Dr			
	,			
Expenditure from corporate funds	Ogden, UT 84403			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription	
EXPENDITURE	Travel In District	$\parallel$	Check if travel outside of Texas. Complete S Check if Austin, TX, officeholder living exper	
		Fu		
Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held	
expenditure to benefit C/OH				
Date	Payee name			
11/22/2024	Freshworks			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$181.48	2950 S Delaware, Suite 201			
- Funanditure from				
Expenditure from corporate funds	San Mateo, CA 94403			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	<b>(b)</b> De	escription	
OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete S	
			Check if Austin, TX, officeholder living exper	nse
			abooription	
Complete ONLY if direct	Candidate/Officeholder name Office so	<u>l</u> uaht	Office held	
expenditure to benefit C/O		-9	Since field	

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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 co	omplete t	this form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (E	thics Commission Filers)
Sch: 98/162 Rpt:	Texas Democratic Party		00015831	
4 Date	5 Payee name		I	
11/22/2024	Freshworks			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$8.61	2950 S Delaware, Suite 201			
Expenditure from corporate funds	San Mateo, CA 94403			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	<b>(b)</b> De	escription	
OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete	
			Check if Austin, TX, officeholder living exp Jbscription	pense
			abscription	
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	laht	Office held	
expenditure to benefit C/O		ugiit	Office field	
Date	Davis name			
11/22/2024	Payee name Freshworks			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$32.07	2950 S Delaware, Suite 201	oue		
Ψ32.01	2330 3 Delaware, Suite 201			
Expenditure from corporate funds	San Mateo, CA 94403			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	<b>(b)</b> De	escription	
OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Check if Austin, TX, officeholder living exp	
		∐ Sı	Lbscription	ense
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u> </u>	Office held	
expenditure to benefit C/OH				
Date	Payee name			
12/20/2024	Freshworks			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$32.07	2950 S Delaware, Suite 201	•		
	·			
Expenditure from corporate funds	San Mateo, CA 94403			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	<b>(b)</b> De	escription	
OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete	
			Check if Austin, TX, officeholder living exp	pense
			absoription	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	<u>l</u> uaht	Office held	
expenditure to benefit C/O		9	Silios field	

### 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 comp	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 99/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	•
10/30/2024	Gallardo, Arturo	
6 Amount (\$)	7 Payee address; City; State; Zip Code	)
\$55.71	PO Box 15707	
— Forestitus from		
Expenditure from corporate funds	Austin, TX 78761	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	) Description
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
LAFENDITORE		Check if Austin, TX, officeholder living expense
		Mileage
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI		d Office field
Date	Payee name	
11/04/2024	Game Plan Strategies LLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,943.49	117 9th Street	
Expenditure from		
corporate funds	Washington, DC 20002	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Consulting
		Consulting
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI	9	
Date	Payee name	
11/04/2024	Game Plan Strategies LLC	
		,
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 117 9th Street	•
\$10,000.00	117 Sur Sueet	
Expenditure from	Machineton DC 20003	
corporate funds	Washington, DC 20002	
PURPOSE OF	, , ,	Description  Check if travel outside of Taylor Complete Schoolule T
EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Consulting
		•
Complete ONLY if direct	Candidate/Officeholder name Office sough	t 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 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: 100/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/21/2024	Game Plan Strategies LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$10,000.00	117 9th Street
Expenditure from corporate funds	Washington, DC 20002
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/30/2024	Garcia, Ryan
Amount (\$)	Payee address; City; State; Zip Code
\$1,837.54	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/08/2024	Garcia, Ryan
Amount (\$)	Payee address; City; State; Zip Code
\$177.28	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Mileage
	Ivilicayc
Complete CNII V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	• • • • • • • • • • • • • • • • • • •
, , , , , , , , , , , , , , , , , , , ,	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

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

Candidate/Officeholder/Politica Credit Card Payment	al 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 File	ers)
Sch: 101/162 Rpt:	Texas Democratic Party 00015831	
4 Date	5 Payee name	
11/08/2024	Garcia, Ryan	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$253.44	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Mileage	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experientare to serious eye.		
Date	Payee name	
11/08/2024	Garcia, Ryan	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,837.54	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Payroll	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
	1	
Date	Payee name	
11/22/2024	Garcia, Ryan	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,837.55	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Payroll	
		ı
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	Н	
Forms provided by Tayas F	thics Commission www.athics state ty us Version V/ 1.0 Edd	2000

### SCHEDULE F1

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

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: 102/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/20/2024	Garcia, Ryan
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,837.55	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Payroll
	F ayroll
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	David and the second se
Date	Payee name
11/05/2024	Garcia, Ryan
Amount (\$)	Payee address; City; State; Zip Code
\$1,837.55	PO Box 15707
Expenditure from	
corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
D-4-	
Date	Payee name
12/20/2024	Gauthier, Connor
Amount (\$)	Payee address; City; State; Zip Code
\$1,476.31	PO Box 15707
Expenditure from	
corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### SCHEDULE F1

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

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: 103/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/20/2024	Geslani, Anthony K
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,476.31	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	GoDaddy.com
Amount (\$)	Payee address; City; State; Zip Code
\$14.18	14455 N Hayden Rd, Ste 219
Expenditure from corporate funds	Scottsdale, AZ 85260
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense  Domain Names
	Domain Names
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	GoDaddy.com
Amount (\$)	Payee address; City; State; Zip Code
\$22.50	14455 N Hayden Rd, Ste 219
Ψ22.30	14455 W Hayden Na, Ste 215
Expenditure from corporate funds	Scottsdale, AZ 85260
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Domain Names
Complete CNII V if direct	Candidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	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 -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

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 104/162 Rpt:	Texas Democratic Party  00015831
4 Date	5 Payee name
11/22/2024	GoDaddy.com
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$22.50	14455 N Hayden Rd, Ste 219
Expenditure from corporate funds	Scottsdale, AZ 85260
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Domain Names
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	
11/22/2024	Payee name GoDaddy.com
	·
Amount (\$)	Payee address; City; State; Zip Code
\$35.94	14455 N Hayden Rd, Ste 219
Expenditure from corporate funds	Scottsdale, AZ 85260
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense  Domain Names
	Domain Names
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
	<del></del>
Date	Payee name
11/22/2024	GoDaddy.com
Amount (\$)	Payee address; City; State; Zip Code
\$14.19	14455 N Hayden Rd, Ste 219
- Evenanditura from	
Expenditure from corporate funds	Scottsdale, AZ 85260
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Domain Names
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialiture to beliefit C/OI	

### SCHEDULE F1

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

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

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: 105/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
12/20/2024	GoDaddy.com	
6 Amount (\$)	7 Payee address; City; State; Zip Cod	e
\$23.78	14455 N Hayden Rd, Ste 219	
Expenditure from corporate funds	Scottsdale, AZ 85260	
8 PURPOSE OF	, , ,	b) Description
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Domain Names
		Domain Hamos
9 Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/OI		The Office Held
Date	Payee name	
11/22/2024	Google.com	
Amount (\$)	Payee address; City; State; Zip Cod	e
\$50.57	1600 Amphitheatre 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	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	·	Check if Austin, TX, officeholder living expense
		Online Storage
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/OI	1	
Date	Payee name	
11/22/2024	Google.com	
Amount (\$)	Payee address; City; State; Zip Cod	e
\$0.05	1600 Amphitheatre Parkway	
40.00	2000 /	
Expenditure from	Mountain View, CA 94043	
corporate funds		
PURPOSE OF	,	b) Description
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Online Storage
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/OI		in Chief Held

#### 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:	
Sch: 106/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	Google.com
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$611.96	1600 Amphitheatre Parkway
·	
Expenditure from	Mauratain Vienus QA QAQAQ
corporate funds	Mountain View, CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Online Storage
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
11/08/2024	Gostomski, Samuel
Amount (\$)	Payee address; City; State; Zip Code
\$1,812.32	PO Box 15707
Expenditure from	
corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
11/22/2024	Gostomski, Samuel
Amount (\$)	Payee address; City; State; Zip Code
\$1,812.33	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
	To a second seco
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin TX officeholder living evennes
	Check if Austin, TX, officeholder living expense  Payroll
	Γαγιοιι 
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
onpoliciture to beliefit 6/01	•

### 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 (Contract Labor

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 107/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	Great America Financial Services
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$450.37	PO Box 660831
Expenditure from corporate funds	Dallas, TX 75266
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Copier
	Sopio.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
11/05/2024	Great America Financial Services
Amount (\$)	Payee address; City; State; Zip Code
\$450.37	PO Box 660831
Expenditure from	
corporate funds	Dallas, TX 75266
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Copier
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to belieff 6/6/	<u> </u>
Date	Payee name
11/22/2024	HEB
Amount (\$)	Payee address; City; State; Zip Code
\$61.84	P.O. Box 839999
Expenditure from corporate funds	San Antonio, TX 78283
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

#### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 108/162 Rpt:	Texas Democratic Party 00015831	
4 Date	5 Payee name	
11/22/2024	HEB	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$42.38	P.O. Box 839999	
Expenditure from corporate funds	San Antonio, TX 78283	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	
_/	Check if Austin, TX, officeholder living expense	
	Office Supplies	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H	
Date	Payee name	
11/22/2024	HEB	
Amount (\$)	Payee address; City; State; Zip Code	$\neg$
\$73.31	P.O. Box 839999	
Expenditure from corporate funds	San Antonio, TX 78283	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Office Supplies	
		_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
		_
Date	Payee name	
10/30/2024	Hampton Inn & Suites - Corporate	
Amount (\$)	Payee address; City; State; Zip Code	
\$77.33	7930 Jones Branch Drive, Suite 1100	
Expenditure from		
corporate funds	McLean, VA 22102	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense  Lodging	
	Louging	
Operation Children	On this to 10 feet believe and the second of	_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
SAPORIGINATO TO BOTTOIL O/OI		
<u></u>		لِـــ

### SCHEDULE F1

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

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

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

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

Credit Card Payment	The Instruction Guide explains how to co	-	ete this form.
1 Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
Sch: 109/162 Rpt:	Texas Democratic Party		00015831
4 Date	5 Payee name		•
11/22/2024	Hampton Inn		
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode	
\$244.86	2271 W IH 10		
Expenditure from corporate funds	Ft Stockton, TX 79735		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Lodging
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ıght	Office held
expenditure to benefit C/OI	4		
Date	Payee name		
10/30/2024	Harland Checks		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$190.48	2939 Miller Road		
,			
Expenditure from corporate funds	Decatur, GA 30035		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Office Supplies
			Cinec Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sou	laht	Office held
expenditure to benefit C/OI		agi it	Office field
Date	Pausa nama		
11/08/2024	Payee name Holloway, Kiara		
	-		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$1,530.77	PO Box 15707		
Expenditure from corporate funds	Austin, TX 78761		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	_		Check if Austin, TX, officeholder living expense
			Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ıght	Office held
experience to belief 6/01	•		

### 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 Salaries (Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1:	·	3 Filer ID (Ethics Commission Filers)
Sch: 110/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	•
11/22/2024	Holloway, Kiara	
6 Amount (\$)	7 Payee address; City; State; Zip	Code
\$1,530.78	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Payroll
9 Complete ONLY if direct	Candidate/Officeholder name Office s	ought Office held
expenditure to benefit C/O		ough.
Date	Davisa sama	
11/22/2024	Payee name Home Depot	
Amount (\$)	Payee address; City; State; Zip	Code
\$16.51	5445 West Loop	
Expenditure from corporate funds	Houston, TX 77081	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
LAFENDITORE		Check if Austin, TX, officeholder living expense
		Office Supplies
		<u> </u>
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office s	ought Office held
p. 1		
Date	Payee name	
10/30/2024	Homeslice Pizza	
Amount (\$)	Payee address; City; State; Zip	Code
\$38.80	1415 South Congress Avenue	
Funon ditura fra		
Expenditure from corporate funds	Austin, TX 78704	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Food
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office s	ought Office held
SAPORGICATO TO BOTTOTIC OFOI	•	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
vertising 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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing 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: 111/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	Houston Chronicle
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$19.19	P.O. Box 4560
Expenditure from corporate funds	Houston, TX 77210
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/20/2024	Hyatt - Corporate
Amount (\$)	Payee address; City; State; Zip Code
\$138.64	150 North Riverside Plaza, 8th Floor
<b>4100.0</b> 1	100 11010111111111111111111111111111111
Expenditure from	
corporate funds	Chicago, IL 60606
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVERNING	Travel In District Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Lodging
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
12/20/2024	Hyatt - Corporate
Amount (\$)	Payee address; City; State; Zip Code
\$34.64	150 North Riverside Plaza, 8th Floor
Ψ04.04	130 North Averside Flaza, our Floor
Expenditure from	
corporate funds	Chicago, IL 60606
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Travel In District Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Lodging
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

### SCHEDULE F1

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

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

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

Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 112/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	•
11/22/2024	Idealist.org	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$80.00	389 5th Ave.	
Expenditure from		
corporate funds	New York, NY 10016	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Job Posting
		554 · 554··g
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	Office held
expenditure to benefit C/O		
Date	Payee name	
11/22/2024	Intuit	
Amount (\$)	Payee address; City; State; Zip Code	
\$17.30	2700 Coast Ave	
Expenditure from corporate funds	Mountain View, CA 94043	
PURPOSE OF	(**************************************	Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sough	Office held
expenditure to benefit C/O	H	
Date	Payee name	
10/30/2024	Intuit	
Amount (\$)	Payee address; City; State; Zip Code	
\$24.88	2700 Coast Ave	
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
		Processing Fee
		5
Complete ONLY if direct	Candidate/Officeholder name Office sough	Office held
expenditure to benefit C/O		

### SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	plete this form.	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics C	commission Filers)
Sch: 113/162 Rpt:	Texas Democratic Party	00015831	
4 Date	5 Payee name	<u> </u>	
10/30/2024	Intuit		
6 Amount (\$)	7 Payee address; City; State; Zip Co	e	
\$14.36	2700 Coast Ave		
Expenditure from corporate funds	Mountain View, CA 94043		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description	
OF	Fees	Check if travel outside of Texas. Complete Schede	ule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense	
		Processing Fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ht Office held	
experientare to benefit 6/61	'		
Date	Payee name		
10/30/2024	Intuit		
Amount (\$)	Payee address; City; State; Zip Co	е	
\$31.10	2700 Coast Ave		
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 Sched	ule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense	
		Processing Fee	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ht Office held	
expenditure to benefit C/O		office field	
Date	Payee name		
10/30/2024	Intuit		
Amount (\$)	Payee address; City; State; Zip Co	e	
\$5.55	2700 Coast Ave		
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 Schedl Check if Austin, TX, officeholder living expense	ule T.
		Processing Fee	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ht Office held	
expenditure to benefit C/O			

#### 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: 114/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$21.05	2700 Coast Ave
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  Processing Fee
	Flocessing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/30/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$57.24	2700 Coast Ave
Ψ01.24	2100 000017100
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.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/30/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$30.92	2700 Coast Ave
Expenditure from corporate funds	Mountain View, CA 94043
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
	Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

### 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/Political Credit Card Payment	Committee Legal Services Salaries A  The Instruction Guide explains how to co	Vages/Contract Labor	OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)
Sch: 115/162 Rpt:	Texas Democratic Party	(	00015831
4 Date	5 Payee name		
10/30/2024	Intuit		
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode	
\$5.55	2700 Coast Ave		
Expenditure from corporate funds	Mountain View, CA 94043		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
EXPENDITURE	Fees		e of Texas. Complete Schedule T. officeholder living expense
		Processing Fee	inicential living expense
		1 1000001119 1 00	
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ght	Office held
expenditure to benefit C/OH	ı		
Date	Payee name	<u>-                                    </u>	
10/30/2024	Intuit		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$8.99	2700 Coast Ave		
Expenditure from corporate funds	Mountain View, CA 94043		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Fees		e of Texas. Complete Schedule T.
		Processing Fee	fficeholder living expense
		1 1000331119 1 00	
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
expenditure to benefit C/OH		giii	omoc nou
Date	Payee name		
11/22/2024	Intuit		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$7.27	2700 Coast Ave		
<del></del>			
Expenditure from corporate funds	Mountain View, CA 94043		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Fees		e of Texas. Complete Schedule T.
			fficeholder living expense
		Processing Fee	
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
expenditure to benefit C/OH		ym	Onice neid
•			

### SCHEDULE F1

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

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

Candidate/Officenolder/Politica 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: 116/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$12.44	2700 Coast Ave
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  Processing Fee
	Flocessing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/30/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$6.65	2700 Coast Ave
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
	Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit Great	
Date	Payee name
11/08/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$4.33	2700 Coast Ave
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.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

### SCHEDULE F1

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

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/Officenolder/Politica 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: 117/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/08/2024	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$9.60	2700 Coast Ave
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  Processing Fee
	Flocessing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/08/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$24.88	2700 Coast Ave
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
	Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiente to benefit 6/01	'
Date	Payee name
11/22/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$63.15	2700 Coast Ave
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.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Processing Fee
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 -

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	Il Committee Legal Services Salaries A  The Instruction Guide explains how to co	Wages/Contrac omplete this		OTHER (enter a	category not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 118/162 Rpt:	Texas Democratic Party			00015831	
4 Date	5 Payee name				
11/22/2024	Intuit				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$8.99	2700 Coast Ave				
Expenditure from corporate funds	Mountain View, CA 94043				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descr	ription		
OF EXPENDITURE	Fees	Ch	eck if travel outsi		plete Schedule T.
EXPENDITORE		. —		, officeholder living	g expense
		Proce	essing Fee		
		<u> </u>		- m 1	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ught		Office h	eld
Date	Payee name				
11/22/2024	Intuit				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$10.71	2700 Coast Ave				
Expenditure from corporate funds	Mountain View, CA 94043				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descr	ription		
OF EXPENDITURE	Fees	. =			plete Schedule T.
		. –		, officeholder living	g expense
		Proce	essing Fee		
Complete ONLY if direct	Candidate/Officeholder name Office sou	l ught		Office he	eld
expenditure to benefit C/OI					
Date	Payee name				
11/22/2024	Intuit				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$3.83	2700 Coast Ave				
Expenditure from corporate funds	Mountain View, CA 94043				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descr	ription		
OF EXPENDITURE	Fees				plete Schedule T.
LAI LINDITORE		. —		, officeholder living	g expense
		Proce	essing Fee		
Complete ONLY if direct	Candidate/Officeholder name Office sou	laht		Office he	old.
expenditure to benefit C/OI		agrit		Office III	ciu

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ense 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

Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 119/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	•
11/22/2024	Intuit	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$7.27	2700 Coast Ave	
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 Processing Fee
		,
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI	1	
Date	Payee name	
11/05/2024	Intuit	
Amount (\$)	Payee address; City; State; Zip Code	
\$9.60	2700 Coast Ave	
Expenditure from corporate funds	Mountain View, CA 94043	
PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	Description  Check if travel outside of Towas Complete School le T
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI	1	
Date	Payee name	
11/05/2024	Intuit	
Amount (\$)	Payee address; City; State; Zip Code	
\$13.92	2700 Coast Ave	
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
		Processing Fee
		-
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI	1	

### SCHEDULE F1

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

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

Credit Card Payment	The Instruction Guide explains how to c	complete this form.
1 Total pages Schedule F1:	-	3 Filer ID (Ethics Commission Filers)
Sch: 120/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	<u> </u>
11/05/2024	Intuit	
6 Amount (\$)	7 Payee address; City; State; Zip C	Code
\$6.41	2700 Coast Ave	
Expenditure from		
corporate funds	Mountain View, CA 94043	
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
		Processing Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O	1	
Date	Payee name	
11/05/2024	Intuit	
Amount (\$)	Payee address; City; State; Zip C	Code
\$5.31	2700 Coast Ave	
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
		Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O	1	
Date	Payee name	
11/05/2024	Intuit	
Amount (\$)	Payee address; City; State; Zip C	code
\$0.86	2700 Coast Ave	
- Constability Cons		
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.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Processing Fee
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/Ol		Onice field
Francisco Made T		V - V/4.05110

### SCHEDULE F1

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

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: 121/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/05/2024	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$16.74	2700 Coast Ave
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  Processing Fee
	1 Toccssing rec
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
5.	
Date	Payee name
11/05/2024	Intuit
Amount (\$)	Payee address; City; State; Zip Code
\$5.55	2700 Coast Ave
— Forestitus from	
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.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/30/2024	Kashlak, Jacob P
Amount (\$)	Payee address; City; State; Zip Code
\$1,124.25	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to belief 6/01	•

### 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 F	Filer ID (Ethics Commission Filers)
Sch: 122/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
11/08/2024	Kashlak, Jacob P	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,131.93	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF		e of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, o	fficeholder living expense
	Payroll	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
experialiture to benefit C/O	// I	
Date	Payee name	
11/22/2024	Kashlak, Jacob P	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,131.92	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	e of Texas. Complete Schedule T.
LXI LINDITORE	1	fficeholder living expense
	Payroll	
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		Office field
Date	Payee name	
12/20/2024	Kashlak, Jacob P	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,131.92	PO Box 15707	
Expenditure from		
corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	e of Texas. Complete Schedule T.
	Payroll	fficeholder living expense
	Tayroll	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/Ol		Since field

### SCHEDULE F1

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

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

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	e this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 123/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	•
11/05/2024	Kashlak, Jacob P	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,140.24	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	[	Check if Austin, TX, officeholder living expense
		Payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
<u> </u>		
Date	Payee name	
11/22/2024	Knight Office Solutions	
Amount (\$)	Payee address; City; State; Zip Code	
\$5.23	2525 Brockton Dr, Suite 290	
Expenditure from		
corporate funds	Austin, TX 78758	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	L	Check if Austin, TX, officeholder living expense
		ээры
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	•	
Date	Payee name	
12/20/2024	Lara, Jessica	
Amount (\$)		
\$1,476.31	Payee address; City; State; Zip Code PO Box 15707	
Ψ1,470.01	1 0 Box 13101	
Expenditure from	Austin, TX 78761	
corporate funds		
PURPOSE OF	l ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor L	Check if Austin, TX, officeholder living expense
		Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	H	

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

Candidate/Officenolder/Politica 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: 124/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	Lara, Jessica
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$57.95	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Mileage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to serioin eye.	
Date	Payee name
11/22/2024	Later.com
Amount (\$)	Payee address; City; State; Zip Code
\$12.96	353 Water Street #500
Expenditure from corporate funds	Vancouver BC Canada
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
E/11 E/10/1. (	Check if Austin, TX, officeholder living expense
	Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff of of	'
Date	Payee name
12/20/2024	Later.com
Amount (\$)	Payee address; City; State; Zip Code
\$12.96	353 Water Street #500
Expenditure from corporate funds	Vancouver BC Canada
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Subscription
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

### SCHEDULE F1

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

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

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: 125/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
11/22/2024	Love's Travel	
6 Amount (\$)	7 Payee address; City; State; Zip	Code
\$13.08	612 Pederson Rd	
, , , , ,		
Expenditure from corporate funds	Katy, TX 77493	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		1 401
9 Complete ONLY if direct	Candidate/Officeholder name Office s	L ought Office held
expenditure to benefit C/Ol		ought Office field
Data		
Date	Payee name	
11/21/2024	Map Political Communications	
Amount (\$)	Payee address; City; State; Zip (	Code
\$11,012.61	2400 S 4th St	
Expenditure from corporate funds	Austin, TX 78704	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Mailing
Complete ONLY if direct	Candidate/Officeholder name Office s	Dught Office held
expenditure to benefit C/O	Ц	Representative District 118
		representative District 110
Date	Payee name	
11/21/2024	Map Political Communications	
Amount (\$)	Payee address; City; State; Zip	Code
\$19,151.66	2400 S 4th St	
Expenditure from		
corporate funds	Austin, TX 78704	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Mailing
Operation Children	Open distants (Office In address	Off. 1.11
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office s  H Carranza, Kristian State F	•
State Representative District 118		

#### 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: 126/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/20/2024	Mendez, Alfred
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,476.31	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense  Payroll
	r ayıoli
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/20/2024	Microsoft Corporation
Amount (\$)	Payee address; City; State; Zip Code
\$69.27	One Microsoft Way
Evponditure from	
Expenditure from corporate funds	Redmond, WA 98052
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Software
2 1 2 2 1 1 2 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
·	
Date	Payee name
12/20/2024	Moore, Devyn
Amount (\$)	Payee address; City; State; Zip Code
\$1,476.31	PO Box 15707
Evpanditura from	
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
2 2	

### 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 co	omplete t	this form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 127/162 Rpt:	Texas Democratic Party		00015831	
4 Date	5 Payee name		<b>.</b>	
11/22/2024	Nextiva			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$30.85	8800 E Chaparral Rd Suite 300			
Expenditure from corporate funds	Scottsdale, AZ 85250			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	<b>(b)</b> De	escription	
OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Compl	
		l L	Check if Austin, TX, officeholder living e elephone	expense
			лорпопо	
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office hel	d
expenditure to benefit C/O		J		
Date	Payee name			
12/20/2024	Nextiva			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$30.93	8800 E Chaparral Rd Suite 300			
	·			
Expenditure from corporate funds	Scottsdale, AZ 85250			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription	
EXPENDITURE	Office Overhead/Rental Expense	$\parallel$	Check if travel outside of Texas. Compl Check if Austin, TX, officeholder living of	
		Te	elephone	
Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office hel	d
expenditure to benefit C/O	1			
Date	Payee name			
10/30/2024	Nguyen, Austin			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$239.37	PO Box 15707			
Expenditure from				
corporate funds	Austin, TX 78761			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	<b>(b)</b> De	escription	
EXPENDITURE	Salaries/Wages/Contract Labor	╽╠	Check if travel outside of Texas. Compl Check if Austin, TX, officeholder living of	
		l Pa	ayroll	лрепас
Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office hel	d
expenditure to benefit C/O	1			

### SCHEDULE F1

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

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

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: 128/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	<u> </u>
11/08/2024	Nguyen, Austin	
6 Amount (\$)	7 Payee address; City; State; Zip Code	e
\$1,137.63	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
LXI LINDITORE		Check if Austin, TX, officeholder living expense  Payroll
		rayiuii
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O		office field
Date	Dove name	
11/22/2024	Payee name Nguyen, Austin	
		2
Amount (\$) \$1,131.93	Payee address; City; State; Zip Code PO Box 15707	=
Φ1,131.93	PO BOX 13707	
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O	4	
Date	Payee name	
12/20/2024	Nguyen, Austin	
Amount (\$)	Payee address; City; State; Zip Code	9
\$1,131.93	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE		b) Description
OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Payroll
Operation Children	Condidate (Office halden no	OF
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt Office held

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

xpense 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

Candidate/Officeholder/Politica Credit Card Payment	Il 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: 129/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/05/2024	Nguyen, Austin
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$290.84	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Payroll
	r ayıoli
O Commission ONLY if dispose	Condidate/Office helder name Office accepts
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	Nguyen, Austin
Amount (\$)	Payee address; City; State; Zip Code
\$104.32	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Travel In District  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Mileage
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
12/20/2024	Nichols, Katie
Amount (\$)	Payee address; City; State; Zip Code
\$1,512.03	PO Box 15707
Ψ1,312.00	1 O BOX 13101
Expenditure from	A
corporate funds	Austin, TX 78761
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

### SCHEDULE F1

Advertising Expense Every Accounting/Banking Feet Consulting Expense Footcontrolutions/ Donations Made By - Giff Consulting Consulti

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	Il 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: 130/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	Nichols, Katie
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$81.28	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Mileage
	ivilieage
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/30/2024	Nichols, Katie
Amount (\$)	Payee address; City; State; Zip Code
\$119.68	PO Box 15707
Evanditure from	
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Mileage
2 1 2 2 1 1 2 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/30/2024	Orrantia, Marco A
Amount (\$)	Payee address; City; State; Zip Code
\$1,624.58	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
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

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

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 Salaries (Contract Labor

Credit Card Payment	The Instruction Guide explains how to con	nplete this form.
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)
Sch: 131/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	•
11/08/2024	Orrantia, Marco A	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de
\$1,632.26	PO Box 15707	
·		
Expenditure from corporate funds	Austin, TX 78761	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Payroll
		. 4,10
9 Complete ONLY if direct	Candidate/Officeholder name Office soug	tht Office held
expenditure to benefit C/OI		Tit. Office field
Date	Payee name	
11/22/2024	Orrantia, Marco A	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$1,632.26	PO Box 15707	
Evponditure from		
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	-	Check if Austin, TX, officeholder living expense
		Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht Office held
experientare to benefit ever	•	
Date	Payee name	
12/20/2024	Orrantia, Marco A	
Amount (\$)	Payee address; City; State; Zip Cod	de
\$1,632.26	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE		(b) Description
OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Callatinos, 11 algos, Contract Labor	Check if Austin, TX, officeholder living expense
		Payroll
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/OI	7	

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Exp Legal Services The Instruction Guide	S	-	Contract Labor		Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:	2 FILER NAMI					3	Filer ID	(Ethics Commission Filers)
_	Sch: 132/162 Rpt:	l	nocratic Party					00015831	(Euros Commission Friers)
_	·							00013031	
4	Date	5 Payee name							
	11/05/2024	Orrantia, M	arco A						
6	Amount (\$)	<b>7</b> Payee addre	ess; City;	State; Z	Zip Code				
	\$1,640.57	PO Box 15	707						
	Expenditure from corporate funds	Austin, TX	78761						
8	PURPOSE	(a) Category (S	See Categories listed at the t	op of this schedu	le) (b)	Description			
	OF EXPENDITURE		ages/Contract Labo			Check if travel		de of Texas. Compofficeholder living	
9	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Offic	ce sought			Office he	ld
	Date	Payee name							
	10/31/2024	Orta, Robe	rt T						
	Amount (\$)	Payee addre	ess; City;	State; 2	Zip Code				
	\$2,391.84	PO Box 15	707						
	Expenditure from corporate funds	Austin, TX	78761						
	PURPOSE OF EXPENDITURE	l	See Categories listed at the tages/Contract Laborate		(b)	<b>-</b>		de of Texas. Comp	
						Fayron			
	Complete ONLY if direct expenditure to benefit C/Oł		ficeholder name	Offi	ce sought	- ayıon		Office he	ld
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ïceholder name	Offi	ce sought	Fayioli		Office he	ld
	expenditure to benefit C/O	H Payee name	9	Offi	ce sought	Payloli		Office he	ld
	expenditure to benefit C/O	<del>-</del>	9			Payloli		Office he	ld
	expenditure to benefit C/O	H Payee name	ert T		ce sought	Payloli		Office he	ld
	expenditure to benefit C/OhDate 11/15/2024	Payee name Orta, Robe	ert T ess; City;			Payloli		Office he	ld
	Date 11/15/2024 Amount (\$)	Payee name Orta, Robel Payee addre	ert T ess; City; 707			Payloli	_	Office he	ld
	Date 11/15/2024 Amount (\$) \$2,391.83  Expenditure from corporate funds  PURPOSE	Payee name Orta, Robel Payee addre PO Box 15	ert T ess; City; 707	State; Z	Zip Code	Description		Office he	ld
	Date 11/15/2024 Amount (\$) \$2,391.83  Expenditure from corporate funds  PURPOSE OF	Payee name Orta, Robel Payee addre PO Box 15  Austin, TX  (a) Category (s	ess; City; 707	State; Z	Zip Code	Description		de of Texas. Com	olete Schedule T.
	Date 11/15/2024 Amount (\$) \$2,391.83  Expenditure from corporate funds  PURPOSE	Payee name Orta, Robel Payee addre PO Box 15  Austin, TX  (a) Category (s	e: ert T ess; City; 707 78761 See Categories listed at the t	State; Z	Zip Code	Description			olete Schedule T.
	Date 11/15/2024 Amount (\$) \$2,391.83  Expenditure from corporate funds  PURPOSE OF	Payee name Orta, Robe Payee addre PO Box 15  Austin, TX  (a) Category (s) Salaries/Wa	e: ert T ess; City; 707 78761 See Categories listed at the t	State; Z	Zip Code	Description Check if travel Check if Austin		de of Texas. Com	olete Schedule T. expense

### SCHEDULE F1

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

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

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

Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 133/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
12/13/2024	Orta, Robert T	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$2,391.84	PO Box 15707	
Expenditure from		
corporate funds	Austin, TX 78761	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Payroll
		ayron
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI		0.1100 1.1010
Date	Payee name	
11/27/2024	Orta, Robert T	
Amount (\$) \$2,391.83	Payee address; City; State; Zip Code PO Box 15707	
Φ2,391.03	PO BOX 13707	
Expenditure from corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Payroll
		ayıon
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	•	Cince hold
Date	Payee name	
12/27/2024	Orta, Robert T	
Amount (\$) \$2,391.84	Payee address; City; State; Zip Code PO Box 15707	
Ψ2,331.04	FO BOX 13707	
Expenditure from	Austin TV 70761	
corporate funds	Austin, TX 78761	
PURPOSE OF	,	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor	Check if Austin, TX, officeholder living expense
		Payroll
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 -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: 134/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/20/2024	Ortiz, Andre
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,476.31	PO Box 15707
Expenditure from	
corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Payroll
	i ayron
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payeo namo
12/20/2024	Payee name Otter AI
Amount (\$)	Payee address; City; State; Zip Code
\$614.40	5150 W El Camino Real
Expenditure from	Suite A-22
corporate funds	Los Altos, CA 94022
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense  Software
	Software
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	David and the second se
Date 11/22/2024	Payee name PIADA
Amount (\$)	Payee address; City; State; Zip Code
\$10.73	6602 Fannin St
Expenditure from	
corporate funds	Houston, TX 77030
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Food
	Fuou
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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	<u> </u>
Sch: 135/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	Parks, Sonja
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,396.22	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll
	,
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/05/2024	Patton Data Processing
Amount (\$)	Payee address; City; State; Zip Code
\$960.00	253 Blackthorn Drive
Expenditure from corporate funds	Nicholasville, KY 40356
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Compliance Reporting Services
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/30/2024	Patton Data Processing
Amount (\$)	Payee address; City; State; Zip Code
\$1,280.00	253 Blackthorn Drive
Expenditure from corporate funds	Nicholasville, KY 40356
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Compliance Reporting Services
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 C

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

Travel in Distr
Travel Out of I
tract Labor OTHER (enter

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to co	-	tet this form.
1 T	otal pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 136/162 Rpt:	Texas Democratic Party		00015831
<b>4</b> D	ate	5 Payee name		·
1	0/30/2024	Peavy, John C		
<b>6</b> A	mount (\$)	7 Payee address; City; State; Zip Co	de	
	\$1,680.86	PO Box 15707		
	E constituir form			
	Expenditure from corporate funds	Austin, TX 78761		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense  Payroll
				T dyron
9 C	complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	xpenditure to benefit C/O			
D	ate	Payee name		
1	1/08/2024	Peavy, John C		
A	mount (\$)	Payee address; City; State; Zip Co	de	
	\$1,680.86	PO Box 15707		
	, ,			
	Expenditure from corporate funds	Austin, TX 78761		
	PURPOSE		(b)	Description
	OF	Salaries/Wages/Contract Labor	()	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Payroll
				0.00
	complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	gnt	Office held
	ate	Payee name		
	1/22/2024	Peavy, John C		
Α	mount (\$)	Payee address; City; State; Zip Co	de	
	\$1,680.85	PO Box 15707		
	Expenditure from	: =\/ ====		
Ш	corporate funds	Austin, TX 78761		
	PURPOSE OF	,	(b)	Description  Check if travel outside of Tayon Complete Schoolule T
- 1	EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Payroll
	complete ONLY if direct	Candidate/Officeholder name Office sout	ght	Office held
e	xpenditure to benefit C/OI	1		

### SCHEDULE F1

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

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	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: 137/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/20/2024	Peavy, John C
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,680.86	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Payroll
	T dyfoli
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
11/22/2024	Peavy, John C
Amount (\$)	Payee address; City; State; Zip Code
\$179.20	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Travel In District Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Mileage
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	4
Date	Payee name
10/30/2024	Peavy, John C
Amount (\$)	Payee address; City; State; Zip Code
\$808.72	PO Box 15707
•	
Expenditure from corporate funds	Austin, TX 78761
-	,
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Mileage
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

### 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 comple	ete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 138/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
11/08/2024	Peter K Mungiguerra PLLC	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,600.00	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78761	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b)	Description
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Payroll
		. ay.o
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI		Office field
D-1-		
Date	Payee name	
11/22/2024	Peter K Mungiguerra PLLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,600.00	PO Box 15707	
Expenditure from		
corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Payroll
		Faylon
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI		Office field
Date	Payee name	
10/31/2024	Pfau, Victoria	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,391.84	PO Box 15707	
Expenditure from		
corporate funds	Austin, TX 78761	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Payroll
Complete CNII V if direct	Condidate/Officeholder name Office accept	Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	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 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

Candidate/Officenoider/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: 139/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/15/2024	Pfau, Victoria
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,391.83	PO Box 15707
- Funanditura from	
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense  Payroll
	i ayıon
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Data	
Date	Payee name
12/13/2024	Pfau, Victoria
Amount (\$)	Payee address; City; State; Zip Code
\$2,391.84	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit even	
Date	Payee name
11/27/2024	Pfau, Victoria
Amount (\$)	Payee address; City; State; Zip Code
\$2,391.83	PO Box 15707
Expenditure from	
corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense  Payroll
	rayiuii
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

#### SCHEDULE F1

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

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: 140/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/27/2024	Pfau, Victoria
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,391.84	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	Picnik Burnet Road
Amount (\$)	Payee address; City; State; Zip Code
\$190.75	4801 Burnet Rd
Expenditure from corporate funds	Austin, TX 78756
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Food
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/30/2024	Pitney Bowes Global Financial Svc, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$24.17	PO BOX 371887
Ψ24.17	FO BOX 3/100/
Expenditure from corporate funds	Pittsburgh, PA 15250
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Office Equipment
Complete CNII V if divert	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	<b>y</b>

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Ontations 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: 141/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/20/2024	Polk, Kawanda
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,538.92	PO Box 15707
Expenditure from	
corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/31/2024	Prado, Abel
Amount (\$)	Payee address; City; State; Zip Code
\$2,391.84	PO Box 15707
<del>+-,</del> :	
Expenditure from corporate funds	Austin, TX 78761
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/15/2024	Prado, Abel
Amount (\$)	Payee address; City; State; Zip Code
\$2,391.83	PO Box 15707
<del>+</del> =,001.00	
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
-	Check if Austin, TX, officeholder living expense  Payroll
	T ASTON
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 complete this form.				
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethi	cs Commission Filers)
Sch: 142/162 Rpt:	Texas Democratic Party		00015831	
4 Date	5 Payee name			
12/13/2024	Prado, Abel			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$2,391.84	PO Box 15707			
Expenditure from corporate funds	Austin, TX 78761			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	on	
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if	travel outside of Texas. Complete Se	
LXI LINDITORE		ш	Austin, TX, officeholder living expen	se
		Payroll		
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held	
expenditure to benefit C/O		ym	Office field	
Data				
Date 11/27/2024	Payee name Prado, Abel			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$2,391.83	PO Box 15707			
Expenditure from corporate funds	Austin, TX 78761			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	on	
OF EXPENDITURE	Salaries/Wages/Contract Labor	<u> </u>	travel outside of Texas. Complete S	
		Payroll	Austin, TX, officeholder living expen	se
		1 dyron		
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held	
expenditure to benefit C/O		5		
Date	Payee name			
12/27/2024	Prado, Abel			
Amount (\$)	Payee address; City; State; Zip Co	da		
\$2,391.84	PO Box 15707	uc		
Ψ2,001.04	1 0 Box 13101			
Expenditure from corporate funds	Austin, TX 78761			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	on	
OF EXPENDITURE	Salaries/Wages/Contract Labor		travel outside of Texas. Complete S	
		Payroll	Austin, TX, officeholder living expen	se
		i ayioii		
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	aht	Office held	
expenditure to benefit C/O		a	Office field	

### SCHEDULE F1

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

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

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME	3	B Filer ID	(Ethics Commission Filers)
Sch: 143/162 Rpt:	Texas Democratic Party		00015831	
4 Date	5 Payee name	1		
10/30/2024	Printed Union - Dallas			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$63,004.52	8800 Chancellor Row			
Expenditure from corporate funds	Dallas, TX 75247			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Printing Expense	ı <u>—</u>	itside of Texas. Comp FX, officeholder living	
		Mail	.,,	ол,рол.22
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office he	pld
expenditure to benefit C/OI	1			
Date	Payee name			
10/30/2024	Quality Inn and Suites - Corporate			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$12.80	1 Choice Hotels Circle, Suite 400			
•	2 0			
Expenditure from corporate funds	Rockville, MD 20850			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	_	
EXPENDITURE	Travel In District	1 <del></del>	itside of Texas. Comp FX, officeholder living	
		Lodging	74, 000.1.0	САРСТОО
Complete ONLY if direct	Candidate/Officeholder name Office so	 ught	Office he	eld
expenditure to benefit C/OI	4			
Date	Payee name			
10/30/2024	Quality Inn and Suites - Corporate			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$12.80	1 Choice Hotels Circle, Suite 400			
,				
Expenditure from corporate funds	Rockville, MD 20850			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Travel In District	I <u></u>	itside of Texas. Comp	•
		Lodging	ΓX, officeholder living	expense
		Louging		
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so		Office he	
expenditure to benefit C/OI		agiit	Office fic	,iu

#### SCHEDULE F1

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 144/162 Rpt:	Texas Democratic Party 00015831
301. 144/102 Kpt.	· I
4 Date	5 Payee name
10/30/2024	Quality Inn and Suites - Corporate
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$61.37	1 Choice Hotels Circle, Suite 400
Expenditure from	Rockville, MD 20850
corporate funds	ROCKVIIIE, IVID 20050
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Lodging
	Louging
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experioliture to beliefft C/OI	
Date	Payee name
10/30/2024	Quality Inn and Suites - Corporate
Amount (\$)	Payee address; City; State; Zip Code
\$74.17	1 Choice Hotels Circle, Suite 400
Φ14.11	1 Choice noteis Circle, Suite 400
Expenditure from	
corporate funds	Rockville, MD 20850
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
LAPENDITORE	Check if Austin, TX, officeholder living expense
	Lodging
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
10/30/2024	Quality Inn and Suites - Corporate
Amount (\$)	Payee address; City; State; Zip Code
\$61.37	1 Choice Hotels Circle, Suite 400
Expenditure from	
corporate funds	Rockville, MD 20850
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Travel In District Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Lodging
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	н

### 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	Il 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: 145/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	Reyes, Jose
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,338.51	PO Box 15707
Expenditure from	
corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
11/08/2024	Reyes, Jose
Amount (\$)	Payee address; City; State; Zip Code
\$1,396.22	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
11/22/2024	Reyes, Jose
Amount (\$)	Payee address; City; State; Zip Code
\$1,396.22	PO Box 15707
72,000.22	
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
-	Check if Austin, TX, officeholder living expense  Payroll
	T ASTON
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

#### SCHEDULE F1

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

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

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: 146/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	Reyes, Jose
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$161.60	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Mileage
O Commission ONII V if allowed	Our did to 10 ff as had done as one of the second to the s
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/04/2024	Rodman, Megan
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	5503 Mercedes Ave.
Expenditure from corporate funds	Dallas, TX 75206
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Consulting Expense Check if Austin, TX, officeholder living expense
	Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/22/2024	San Antonio Express-News
	·
Amount (\$)	Payee address; City; State; Zip Code
\$19.19	P.O. Box 80088
Expenditure from corporate funds	Prescott, AZ 86304
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
LAPENDITORE	Check if Austin, TX, officeholder living expense
	Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
onponditure to beliefit 6/01	•

#### 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/Officenoider/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: 147/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
12/19/2024	San Marcos CISD
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$120.00	631 Mill Street
Expenditure from corporate funds	San Marcos, TX 78666
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Facility Rental
	i domy nondi
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/30/2024	Sanchez, Abraham
Amount (\$)	Payee address; City; State; Zip Code
\$1,338.51	PO Box 15707
— Evanditura from	
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/08/2024	Sanchez, Abraham
Amount (\$)	Payee address; City; State; Zip Code
\$1,396.22	PO Box 15707
. ,	
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll
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 Com

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

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: 148/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	Sanchez, Abraham
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,396.22	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Payroll
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date 10/30/2024	Payee name Sandler Reiff Young & Lamb DC
	Sandler, Reiff, Young & Lamb, PC
Amount (\$)	Payee address; City; State; Zip Code
\$960.00	1090 Vermont Ave., N.W.
Expenditure from	Suite 750
corporate funds	Washington, DC 20005
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Legal Services
	Legal Services
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
<b>5</b> .	
Date	Payee name
10/30/2024	Sandler, Reiff, Young & Lamb, PC
Amount (\$)	Payee address; City; State; Zip Code
\$768.00	1090 Vermont Ave., N.W.
Expenditure from	Suite 750
corporate funds	Washington, DC 20005
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Legal Services
Commission ONII V if dispose	Condidate/Office helder no year.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials 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: 149/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/31/2024	Sandor, David R
6 Amount (\$) \$2,538.40	7 Payee address; City; State; Zip Code PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/15/2024	Sandor, David R
Amount (\$)	Payee address; City; State; Zip Code
\$2,538.40	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/27/2024	Sandor, David R
Amount (\$)	Payee address; City; State; Zip Code
\$2,538.40	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense  Payroll
Complete ONLY if direct expenditure to benefit C/OI	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 Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services 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: 150/162 Rpt:	Texas Democratic Party 00015831		
4 Date	5 Payee name		
10/30/2024	Schmader, Katherine M		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$1,436.97	PO Box 15707		
Expenditure from corporate funds	Austin, TX 78761		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense  Payroll		
	1 dyron		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/O			
Data			
Date	Payee name		
11/22/2024	Schmader, Katherine M		
Amount (\$)	Payee address; City; State; Zip Code		
\$1,457.96	PO Box 15707		
Expenditure from			
corporate funds	Austin, TX 78761		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor		
LAFENDITORE	Check if Austin, TX, officeholder living expense		
	Payroll		
Complete ONLY if direct expenditure to benefit C/OI	Complete ONLY if direct Candidate/Officeholder name Office sought Office held		
Date	Payee name		
11/22/2024	Shred-it USA LLC		
Amount (\$)	Payee address; City; State; Zip Code		
\$52.83	PO Box 101007		
Expenditure from corporate funds	Pasadena, CA 91189		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense		
EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Shredding Services		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Superiority to Solicity Order			

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Candidate/Officeholder/Politica Credit Card Payment		ges/Contract Labor OTHER (enter a category not listed above)
Credit Cara r ayment	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: 151/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	<u> </u>
11/22/2024	Sonesta Select Austin	
6 Amount (\$)	7 Payee address; City; State; Zip Code	e
\$69.52	7522 North Ih-35	
Expenditure from corporate funds	Austin, TX 78752	
·		
8 PURPOSE OF	(con consigning materials are top or and constants)	b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Travel In District	Check if Austin, TX, officeholder living expense
		Lodging
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O	4	
Date	Payee name	
11/22/2024	Sonesta Select Austin	
Amount (\$)	Payee address; City; State; Zip Code	е
\$69.52	7522 North Ih-35	
Expenditure from		
corporate funds	Austin, TX 78752	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
_/		Check if Austin, TX, officeholder living expense
		Lodging
Operation ONE Wife discont	Open distance (Office health as a second	Office held
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH		
'		
Date	Payee name	
10/30/2024	Sonesta Select Austin	
Amount (\$)	Payee address; City; State; Zip Code	е
\$72.57	7522 North Ih-35	
Expenditure from corporate funds	Austin, TX 78752	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF	Travel In District	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Lodging
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt Office held
experiorare to benefit C/Of	1	

#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing 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: 152/162 Rpt:	Texas Democratic Party  00015831	
4 Date	5 Payee name	
10/30/2024	Sonesta Select Austin	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$72.57	7522 North Ih-35	
Expenditure from	Austin, TX 78752	
corporate funds	Austin, 17 10132	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Lodging	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
10/30/2024	Sonesta Select Austin	
Amount (\$)	Payee address; City; State; Zip Code	
\$72.57	7522 North Ih-35	
Expenditure from corporate funds	Austin, TX 78752	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
EXI ENDITORE	Check if Austin, TX, officeholder living expense	
	Lodging	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
11/22/2024	Southwest Airlines	
Amount (\$)		
\$334.05	PO Box 36611	
Expenditure from		
corporate funds	Dallas, TX 75235	
PURPOSE	1	
OF	, <u> </u>	
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Transportation	
	Transportation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experiulture to benefit G/OH		

### 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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 153/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
11/22/2024	Southwest Airlines	
6 Amount (\$)	<b>7</b> Payee address; City; State; Zip C	Code
\$20.48	PO Box 36611	
Expenditure from corporate funds	Dallas, TX 75235	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Transportation
		Tailsportation
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	Dught Office held
Dete		
Date	Payee name	
11/22/2024	Sprout Social	
Amount (\$)	Payee address; City; State; Zip C	Code
\$53.93	30 N Racine Avenue	
Expenditure from		
corporate funds	Chicago, IL 60607	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Software
		Column
Complete ONLY if direct	Candidate/Officeholder name Office so	L ought Office held
expenditure to benefit C/OI		
Data	Davis asses	
Date 11/22/2024	Payee name Squarespace, Inc.	
		N- 4.
Amount (\$)	Payee address; City; State; Zip C	code
\$188.30	459 Broadway, 5th Fl	
Expenditure from		
corporate funds	New York, NY 10013	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Website Maintenance
Complete ONLY if direct	Candidate/Officeholder name Office so	L ought 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	Il 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: 154/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/20/2024	Staging Solutions Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$10,000.00	2014 Lou Ellen Ln
Expenditure from corporate funds	Houston, TX 77018
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Event Production Services
	Event i roddellon Services
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/22/2024	Sunoco
Amount (\$)	Payee address; City; State; Zip Code
\$46.77	4377 FM 1021
·	
Expenditure from corporate funds	Eagle Pass, TX 78852
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Fuel
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/22/2024	Townsend, Ann E
Amount (\$)	Payee address; City; State; Zip Code
\$1,070.66	PO Box 15707
Ψ1,010.00	1 0 200 10101
Expenditure from corporate funds	Austin, TX 78751
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense  Payroll
	r ayıoli
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

### SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense
Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to comp	olete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 155/162 Rpt:	Texas Democratic Party	00015831
4 Date	5 Payee name	
10/30/2024	Townsend, Ann E	
6 Amount (\$)	7 Payee address; City; State; Zip Code	2
\$112.00	PO Box 15707	
Expenditure from corporate funds	Austin, TX 78751	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	Description
EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Mileage
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/O		Cinos nota
Data		
Date	Payee name	
11/22/2024	Twilio	
Amount (\$)	Payee address; City; State; Zip Code	
\$7.46	375 Beale St, Suite 300	
Expenditure from		
corporate funds	San Francisco, CA 94105	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
OF EXPENDITURE	TEXTING	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Texting Services
		Texting dervices
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sough	office held
expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·	office field
Date	Payee name	
11/05/2024	UPS	
Amount (\$)	Payee address; City; State; Zip Code	•
\$23.37	Lockbox 577	
Expenditure from		
corporate funds	Carol Stream, IL 60132	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Shipping
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	office held
experience to belieff 6/01	•	

### 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 pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 156/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
11/22/2024	US Postmaster
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6.30	8225 Cross Park Dr
Expenditure from corporate funds	Austin, TX 78710
·	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Postage - Administrative
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date	Payee name
11/22/2024	Valero
Amount (\$)	Payee address; City; State; Zip Code
\$6.56	One Valero Way
- Evnanditura from	
Expenditure from corporate funds	San Antonio, TX 78249
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Fuel
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ever	
Date	Payee name
11/22/2024	Valero
Amount (\$)	Payee address; City; State; Zip Code
\$7.72	One Valero Way
Expenditure from corporate funds	San Antonio, TX 78249
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
LAFLINDITURE	Check if Austin, TX, officeholder living expense
	Fuel
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialities to beliefft G/OI	•

## SCHEDULE F1

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

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

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: 157/162 Rpt:	Texas Democratic Party	00015831				
4 Date	5 Payee name	<u> </u>				
10/30/2024	Webb, Xaq					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$1,748.32	PO Box 15707					
Expenditure from corporate funds	Austin, TX 78761					
8 PURPOSE		D) Description				
OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE		Check if Austin, TX, officeholder living expense				
		Payroll				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	office held				
experientare to benefit 6/61	'					
Date	Payee name					
11/08/2024	Webb, Xaq					
Amount (\$)	Payee address; City; State; Zip Code					
\$1,748.33	PO Box 15707					
- Cynonditure from						
Expenditure from corporate funds	Austin, TX 78761					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description				
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.				
EXI ENDITORE		Check if Austin, TX, officeholder living expense				
		Payroll				
Complete ONLY if direct	Candidate/Officeholder name Office sough	office held				
expenditure to benefit C/O		dince neid				
Date	Payee name					
11/22/2024	Webb, Xaq					
Amount (\$)	Payee address; City; State; Zip Code					
\$1,748.32	PO Box 15707					
Expenditure from						
corporate funds	Austin, TX 78761					
PURPOSE OF	, ,	Description				
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
		Payroll				
		•				
Complete ONLY if direct	Candidate/Officeholder name Office sough	office held				
expenditure to benefit C/O						

### SCHEDULE F1

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

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

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: 158/162 Rpt:	Texas Democratic Party	00015831			
4 Date	5 Payee name	•			
11/05/2024	Webb, Xaq				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$1,748.33	PO Box 15707				
Expenditure from corporate funds	Austin, TX 78761				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense Payroll			
		Fayron			
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	lught Office held			
expenditure to benefit C/O		agric Cinice neid			
Date	Dayon nama				
12/20/2024	Payee name Wilmes, Kyra				
		ada			
Amount (\$) \$1,476.31	Payee address; City; State; Zip Co	oue			
φ1,470.31	FO BOX 13707				
Expenditure from corporate funds	Austin, TX 78761				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
		Payroll			
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held			
expenditure to benefit C/O	Н				
Date	Payee name				
10/30/2024	Yacyshyn, Ferguson				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$125.44	PO Box 15707				
Expenditure from corporate funds	Austin, TX 78761				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense			
		Mileage			
Complete ONLY if direct	Candidate/Officeholder name Office sou	light Office held			
expenditure to benefit C/O		Agric Office Held			

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E 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	
-	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 159/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	Yacyshyn, Ferguson
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,688.10	PO Box 15707
·	
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	
OF OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Payroll
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	H
Date	Payee name
11/22/2024	Yacyshyn, Ferguson
Amount (\$)	Payee address; City; State; Zip Code
\$2,688.10	PO Box 15707
<del>+=,000.20</del>	
Expenditure from corporate funds	Austin, TX 78761
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	H
Date	Payee name
11/22/2024	Young, Isabelle
Amount (\$)	Payee address; City; State; Zip Code
\$389.75	PO Box 15707
,,,,,	
Expenditure from corporate funds	Austin, TX 78761
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	H

## 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	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: 160/162 Rpt:	Texas Democratic Party	00015831					
4 Date	5 Payee name	Pavee name					
10/30/2024	Young, Isabelle						
6 Amount (\$)	7 Payee address; City; State; Zip C	ode					
\$131.84	PO Box 15707						
Expenditure from corporate funds	Austin, TX 78761						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description				
OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.				
EXPENDITORE			Check if Austin, TX, officeholder living expense				
			Mileage				
O Commission ONLL V if disease	Canalidate/Officelediday.no.no.		Office held				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office so	ugnt	Office held				
Date	Payee name						
11/22/2024	Your Membership, Inc.						
Amount (\$)	Payee address; City; State; Zip C	ode					
\$37.76	6300 Bridge Point Parkway Bldg 1 Suite 300						
Expenditure from							
corporate funds	Austin, TX 78730						
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description				
EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
			Subscription				
Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held				
expenditure to benefit C/O	+						
Date	Payee name						
11/22/2024	Zapier.com						
Amount (\$)	Payee address; City; State; Zip C	ode.					
\$91.08	243 Buena Vista Ave #508	ouc					
402.00	2 to Busha Visia / We // eee						
Expenditure from corporate funds	Mountain View, CA 94086						
		(b)	Description.				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(0)	Description  Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Onice Overneau/Nental Expense		Check if Austin, TX, officeholder living expense				
			Subscription				
Complete ONLY if direct	Candidate/Officeholder name Office so	ught	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 Com

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: 161/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	Zenner, Courtney
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$102.40	PO Box 15707
- Funanditura from	
Expenditure from corporate funds	Austin, TX 78761
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Mileage
	Willeage
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/22/2024	Zoom.com
,,	
Amount (\$)	
\$27.71	55 Almaden Blvd
Expenditure from corporate funds	San Jose, CA 95113
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Subscription
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/22/2024	Zoom.com
Amount (\$)	Payee address; City; State; Zip Code
\$53.89	55 Almaden Blvd
Expenditure from corporate funds	San Jose, CA 95113
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
_/	Check if Austin, TX, officeholder living expense
	Subscription
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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Al 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: 162/162 Rpt:	Texas Democratic Party 00015831
4 Date	5 Payee name
10/30/2024	Zoom.com
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$53.89	55 Almaden Blvd
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	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Subscription
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/20/2024	Zulfiqar, Shifa
Amount (\$)	Payee address; City; State; Zip Code
\$1,476.31	PO Box 15707
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

### **EXPENDITURES MADE BY CREDIT CARD**

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
Sch: 1/3 Rpt: 190/192	Texas Democratic F	Party			00015831		
4 CREDIT CARD ISSUER		ncial institution Bank of Omaha	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid		
Expenditure from corporate funds	\$51.52	11/06/2024	12/03/2024	4			
7 PAYEE	(a) Payee name		(b) Payee ac	ddress;	City,	State,	Zip Code
	Hertz - Corporate		8501 Willia	ıms Rd			
			Estero, FL				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Descripti				
X Political	Travel In District	or triis scriedule)	Transporta	ition			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid		
Expenditure from corporate funds	\$53.67	12/04/2024					
PAYEE	(a) Payee name	•	(b) Payee ad	ddress;	City,	State,	Zip Code
	Amazon.com		PO Box 80	1463			
	7 (11/42011.0011		Seattle, W	A 98108			
PURPOSE OF	(a) Category		(b) Descripti				
EXPENDITURE	(See Categories listed at the top		Office Supplies				
X Political	Office Overhead/Rent	iai Expense					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid		
Expenditure from corporate funds	\$70.34	12/20/2024					
PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code
	4 000 51		Two Jericho Plaza, Floor 2				
	1-800-Flowers						
			Jericho, N'				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti	on			
l <u> </u>	Flowers	of this schedule)	Flowers				
X Political							
Non-Political	(1)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							

### **EXPENDITURES MADE BY CREDIT CARD**

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 2/3 Rpt: 191/192	Texas Democratic Party				00015831		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	) Credit Card Issue	r Paid		
	Expenditure from corporate funds	\$13.31	12/19/2024					
7	PAYEE	(a) Payee name USPS		(b) Payee 8225 Cro	address; oss Park Dr	City,	State,	Zip Code
L				Austin, T				
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Postage	of this schedule)	(b) Descri	otion			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH					Office held			
	PAYMENT	(a) Amount Charged	(b) Date of Charge		) Credit Card Issue	r Paid		
	Expenditure from corporate funds	\$497.96	11/22/2024	12/03/2024				
PAYEE		(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Southwest Airlines		PO Box 36611				
L				Dallas, T	X 75235			
	PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri				
	Non-Political	(a) Charaltiffaranal antaida	of Towns Committee Colombials T		Charlet Access TV	- # I - I - I - I - I - I - I - I -		
┝	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check ii Austin, 1X,	officeholder living exp	lerise	
е	expenditure to benefit C/OH			_				
	Expenditure from corporate funds	(a) Amount Charged \$29.73	(b) Date of Charge 11/06/2024	(c) Date(s)	) Credit Card Issue 124	r Paid		
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		Love's Travel		612 Pederson Rd				
L				Katy, TX				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip	otion			
	X Political							
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
一		l						

### **EXPENDITURES MADE BY CREDIT CARD**

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

Candidate/Officeholder/Politica	•	ces Saluction Guide explains how	aries/Wages/Cor to complete t		HER (enter a category	not listed ab	ove)
1 Total pages Schedule F4:		·			3 Filer ID (Ethics	S Commiss	ion Filers)
Sch: 3/3 Rpt: 192/192	Texas Democratic P	00015831		.0			
4 CREDIT CARD	Name of finan	00010001					
ISSUED				OF UNITEMIZED DITURES	\$		
	see pro	evious		ED TO A CREDIT			
0. 0.1/4.51/5	() 4 (0)	(1) D ( (0)	CARD	0 1:0 11	<u> </u>		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	12/03/202	Credit Card Issuer	Paid		
Expenditure from corporate funds	\$158.97	11/06/2024	12/03/20/				
7 PAYEE	(a) Payee name		(b) Payee a		City,	State,	Zip Code
	Holiday Inn - Corpor	ate	3 Ravinia	Dr. Ste 100			
	rioliday IIII Corpor	aic					
			Atlanta, G				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	of this schedule)	(b) Descrip	tion			
<u></u>	Travel In District	in this defication	Lodging				
X Political							
Non-Political	1	f Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	nse	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	. , , , , ,	Credit Card Issuer	Paid		
Expenditure from corporate funds	\$34.94	11/06/2024	12/03/202	24			
oorporate failes							
PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code
	Flyng J - Corporate		5508 Lonas Rd				
				TN 37909			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	of this schedule)	(b) Descrip	tion			
	Travel In District	it till 3 scriedule)	Fuel				
X Political							
Non-Political	1	f Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	nse	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							