# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to complet		1 Filer ID (Ethics Commi 00088259		2 Total pages f	filed: 84
3 CANDIDATE / OFFICEHOLDER		FIRST Jennifer A.		MI	OFFICE	USE ONLY
NAME					Date Received  ELECTRONIC	CALLY FILED
	NICKNAME	LAST		SUFFIX	01/16/2025	
		Lee				
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	P.O. Box 1916				Receipt #	Amount
Change of Address	Temple, TX 76503				Date Processed	
					Date Flocesseu	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR F	IRST		MI	-	
TREASURER NAME	Mrs.	Naquisha L.				
	NICKNAME L			SUFFIX		
	F	Ramos-Silva				
6 CAMPAIGN	STREET ADDRESS (NO PO B	OX PI FASE):	AP <sup>-</sup>	Γ / SUITE #; CIT`	γ· ST	ATE; ZIP CODE
TREASURER ADDRESS	1708 Saddle Dr.	OK! EE/(SE),	7.4	, , , , , , ,	.,	7(12, 211 0002
(Residence or Business)	Killeen, TX 76543					
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	XTENSION			
TREASURER PHONE	(254) 291-1804					
8 REPORT TYPE	X January 15	30th day before	election	Runoff	15th day after ca	ampaign treasurer
		-			appointment (of	ficeholder only)
	July 15	8th day before e	election	Exceeded modified reporting limit	Final Report (At	tach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	/ Year	
COVERED	10/27/2024	TH	ROUGH	12/31/20	)24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year 11/05/2024	Pr	rimary	Runoff	Other	
	11/05/2024	ΧG	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	IT (if known)	
	None Place N/A District N/A	Bell		State Represer	ntative Place N/A	District 55
				•		
		GO T	O PAGE 2			

#### CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 84

13 C / OH NAME	Lee, Jennifer A.		<b>14</b> Filer ID (00088259	(Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures may have been made without the different are required to report this information	he candidate's or office	eholder's knowledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	X GENERAL	ACT for Texas Classroom Teachers Associat	ion				
		COMMITTEE ADDRESS					
	SPECIFIC	PO Box 1489					
		Austin, TX 78767					
		COMMITTEE CAMPAIGN TREASURER NAME					
		Fickle, Ann					
		COMMITTEE CAMPAIGN TREASURER ADDRES	S				
		PO Box 1489					
		Austin, TX 78767					
16 CONTRIBUTION TOTALS	N PLEDGES, LOANS, CTRONICALLY)	\$ 0.00					
	)	\$ 12,714.48					
EXPENDITURE TOTALS							
	4. TOTAL POLITION	CAL EXPENDITURES		\$ 39,082.77			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA ERIOD	AST DAY OF THE	<b>\$</b> 523.74			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS ( RTING PERIOD	OF THE LAST DAY	\$ 500.00			
<b>17</b> AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.					
		Je	ennifer A. Lee				
		Signature of	Candidate or Officehol	der			
AFFIX NO	TARY STAMP / SEAL AB	OVE					
Sworn to and subs	cribed before me, by the s	aid	, this the	day			
of	, 20, to c	ertify which, witness my hand and seal of office.					
Signature of office	cer administering	Printed name of officer administering	Title of officer	r administering oath			

#### **SUBTOTALS - C/OH**

## FORM C/OH COVER SHEET PG 3

					3 of 84
	ER NAN e, Jenn		<b>19</b> Filer ID 00088259	(Ethi	ics Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	12,714.48
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		\$			
4.	X	SCHEDULE E: LOANS		\$	500.00
5.	X	5	\$	39,082.77	
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	OF C/OH	\$	
11.		\$			
12.		\$			

	MONEI	ARY POLITICAL (	CONTRIBUTIO	NS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/54 Rpt: 4/84	
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 11/05/2024	<ul><li>5 Full name of contributor Adams, Roberta</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#: ate; Zip Code	)	7	Amount of Contribution (\$)	\$15.00
8	Principal occu Not Employe		)	Employer (See Instructions     Not Employed	5)		
	Date 11/02/2024	Full name of contributor Adams, Susanna  Contributor address; City; St  Portland, ME 04103	out-of-state PAC (ID#:	)	•	Amount of Contribution (\$)	\$25.00
	Principal occupation / Job title (See Instructions)  Not Employed		Employer (See Instructions Not Employed	<u> </u> s)			
	Date 11/02/2024	Full name of contributor Adrian, Miohael  Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code		•	Amount of Contribution (\$)	\$25.00
	District	Austin, TX 78763	\ \ \ \ \	Foundation (Construction	<u> </u>		
	Not Employe	pation / Job title (See Instructions ed	)	Employer (See Instructions Not Employed	>) 		
	Date 11/03/2024	Full name of contributor Albers, Harold Contributor address; City; St Art, TX 76820-0099	out-of-state PAC (ID#: ate; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	nation / Job title (See Instructions	)	Employer (See Instructions Not Employed	<u> </u> s)		
	Date 11/03/2024	Full name of contributor Allen, Caryn Contributor address; City; St Forrest Hills, NY 11375	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	)	Employer (See Instructions Not Employed	s)		

	MONEI	ARY POLITICAL (	CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 2/54 Rpt: 5/84	
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 11/05/2024	<ul><li>5 Full name of contributor Allen, Caryn</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#: tate; Zip Code		7	Amount of Contribution (\$)	\$10.00
8	Principal occu Not Employe	Forrest Hills, NY 11375 pation / Job title (See Instructionsed	s) !	Employer (See Instructions     Not Employed	<u> </u> s)		
	Date 11/18/2024	Full name of contributor Allen-Savietta, Cora  Contributor address; City; S  Austin, TX 78752	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$1.00
	Principal occu Statistician	pation / Job title (See Instructions	5)	Employer (See Instructions Berry Consultants	<u> </u> s)		
	Date 10/30/2024	Full name of contributor Alsup, Marion Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
		Austin, TX 78703 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> s)		
Date 11/04/2024		Full name of contributor out-of-state PAC (ID#:) Altemus, Kathleen  Contributor address; City; State; Zip Code  Alexandria, VA 22304			•	Amount of Contribution (\$)	\$25.00
	Principal occu Nanny	pation / Job title (See Instructions	s)	Employer (See Instructions Kwisinski Family	5)		
	Date 10/31/2024	Full name of contributor Apone, James Contributor address; City; S Anchorage, AK 99524	out-of-state PAC (ID#:	)	•	Amount of Contribution (\$)	\$16.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	5)	Employer (See Instructions Not Employed	5)		

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 3/54 Rpt: 6/84	
2	FILER NAME Lee, Jennife	´ A.			3	Filer ID (Ethics Commission 00088259	Filers)
4	Date 10/29/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Banister, Gaurdie</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$100.00
_	Duinning Langu	Houston, TX 77019	1_	Faralousy (Cook backy ations			
8	Consulting	pation / Job title (See Instructions)	9	Employer (See Instructions Different Points of View	5)		
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#:_Barker, James  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$25.00
	Principal occu	Bethseda, MD 20817 pation / Job title (See Instructions)	Г	Employer (See Instructions	<u> </u> ;)		
	Not Employe			Not Employed	,		
	Date 11/03/2024	Full name of contributor out-of-state PAC (ID#:_Baxt, Virginia  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$10.00
		Houston, TX 77007					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
Date 10/29/2024		Full name of contributor out-of-state PAC (ID#:)  Benson, Jerry  Contributor address; City; State; Zip Code  Groveport, OH 43125				Amount of Contribution (\$)	\$3.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u>                                      </u>		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:_Benson, Jerry  Contributor address; City; State; Zip Code  Groveport, OH 43125		)		Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		
			•				

	MONET	ARY POLITICAL CONTRI	BUTION	S		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to comple	ete this for	n.	1	Total pages Schedule A1: Sch: 4/54 Rpt: 7/84	
2	FILER NAME Lee, Jennifer	· A.			3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 11/04/2024	<ul> <li>Full name of contributor  out-of-state</li> <li>Benson, Jerry</li> <li>Contributor address; City; State; Zip Code</li> </ul>	e PAC (ID#:		7	Amount of Contribution (\$)	\$5.00
0	Dringing aggr	Groveport, OH 43125	ام	Employer (See Instructions	<u>,,</u>		
8	Not Employe	pation / Job title (See Instructions) d	9	Employer (See Instructions Not Employed	s)		
	Date 10/28/2024	Berman, Betsy				Amount of Contribution (\$)	\$10.00
		Atlanta, GA 30306	<u> </u>		<u></u>		
	Principal occupation / Job title (See Instructions) General Contractor			Employer (See Instructions Self Employed	5)		
	Date 10/31/2024	Full name of contributor out-of-state Berman, Betsy  Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$6.00
		Atlanta, GA 30306					
	Principal occu General Con	pation / Job title (See Instructions) tractor		Employer (See Instructions Self Employed	s)		
Date 10/28/2024		Full name of contributor out-of-state PAC (ID#:)  Betke, Sophie  Contributor address; City; State; Zip Code  Montrose, CA 91020				Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 11/02/2024	Black, Peter		)	•	Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUTI	ON	IS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 5/54 Rpt: 8/84	
2	FILER NAME Lee, Jennifer	· A.			3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 11/03/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$25.00
_	Dringing! aggs	Sugar Land, TX 77498	١,	Employer (See Instructions	<u></u>		
8	Not Employe	pation / Job title (See Instructions) d	9	Employer (See Instructions Not Employed	5)		
	Date 10/28/2024	Full name of contributor			•	Amount of Contribution (\$)	\$25.00
		Harker Heights, TX 76548			<u></u>		
	Educator	pation / Job title (See Instructions)		Employer (See Instructions Killeen ISD	5)		
	Date 11/03/2024	Full name of contributor out-of-state PAC (ID# Bostic, Carmena  Contributor address; City; State; Zip Code	#:	)	•	Amount of Contribution (\$)	\$50.00
		Miami, FL 33186					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
Date 10/31/2024		Full name of contributor out-of-state PAC (ID#Bowhay, Anne Contributor address; City; State; Zip Code Oak Park, IL 60304		)	•	Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID# Braverman, Alan  Contributor address; City; State; Zip Code  New York, NY 10018		)	•	Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Braverman CPA	s)		

	MONET	ARY POLITICAL CONTRIBUTION	Ν	IS		SCHEDULE	<b>A1</b>
	The Instruc	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 6/54 Rpt: 9/84	
2	FILER NAME Lee, Jennifer	´ A.			3	Filer ID (Ethics Commission 00088259	Filers)
4	Date 11/03/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Bridges, Susan</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$20.24
_	Delicational	Bonita Springs , FL 34135	١,	Faralas and Constructions			
8	Not Employe	pation / Job title (See Instructions) d	9	Employer (See Instructions Not Employed	5)		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:_ Broder, Harriet  Contributor address; City; State; Zip Code		)	•	Amount of Contribution (\$)	\$3.00
	Principal occur	Potomac, MD 20854 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	Health Coac			Self Employed	-,		
	Date 10/29/2024	Full name of contributor		)	•	Amount of Contribution (\$)	\$2.00
		Carlsbad, NM 88221					
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
Date 10/28/2024		Full name of contributor out-of-state PAC (ID#:_ Brown, Lynda Contributor address; City; State; Zip Code Corona, CA 92883		)		Amount of Contribution (\$)	\$25.00
	Principal occu Project Mana	pation / Job title (See Instructions)		Employer (See Instructions Admagic	<u>l</u> 5)		
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#:_Canahuati, Judy  Contributor address; City; State; Zip Code  Columbia, MD 21045		)		Amount of Contribution (\$)	\$25.00
	Principal occu Technical Ad	pation / Job title (See Instructions) Ivisor		Employer (See Instructions USAID	5)		
			•				

	MONET	ARY POLITICAL C	ONTRIBUTIO	N:	S		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how	to complete this for	rm	1.	1	Total pages Schedule A1: Sch: 7/54 Rpt: 10/84	
2	FILER NAME Lee, Jennife	r A.				3	Filer ID (Ethics Commission 00088259	Filers)
4	Date 11/01/2024	<ul><li>5 Full name of contributor Canahuati, Judy</li><li>6 Contributor address; City; St.</li></ul>	out-of-state PAC (ID#: ate; Zip Code		)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu Technical Ac	Columbia, MD 21045 pation / Job title (See Instructions	) 9		Employer (See Instructions	 i)		
	Date 11/05/2024	Full name of contributor Cardell, Judith Contributor address; City; St. Boulder , CO 80302			)		Amount of Contribution (\$)	\$25.00
	Principal occupation / Job title (See Instructions)  Not Employed		)		Employer (See Instructions Not Employed	<u>I</u> 5)		
	Date 11/14/2024	Full name of contributor Carranza, Susana Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code				Amount of Contribution (\$)	\$25.00
	Drincinal occu	Austin, TX 78701 pation / Job title (See Instructions	1		Employer (See Instructions	·/		
	Chemical En	· ·			Makel Engineering, Inc.	•)		
	Date 11/14/2024	Full name of contributor Carranza, Susana Contributor address; City; St Austin, TX 78701	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$25.00
	Principal occu Chemical En	pation / Job title (See Instructions gineer			Employer (See Instructions Makel Engineering, Inc.	5)		
	Date 12/14/2024	Full name of contributor Carranza, Susana Contributor address; City; St	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$25.00
	Principal occu Chemical En	pation / Job title (See Instructions gineer			Employer (See Instructions Makel Engineering, Inc.	s)		

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 8/54 Rpt: 11/84	
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 10/30/2024	<ul><li>5 Full name of contributor Carroll, Stephen</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: tte; Zip Code		7	Amount of Contribution (\$)	\$25.00
8	Principal occu Not Employe		9	Employer (See Instructions Not Employed	j ;)		
	Date 10/31/2024	Full name of contributor Carsrud, Alan Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
	Principal occupation / Job title (See Instructions) Empl		Employer (See Instructions Not Employed	<u> </u> 5)			
	Date 11/22/2024	Full name of contributor  Carter, Lynn  Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
		Austin, TX 78759			_		
	Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		
Date 12/22/2024		Full name of contributor Carter, Lynn Contributor address; City; Sta	out-of-state PAC (ID#: ite; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u> 5)		
	Date 11/03/2024	Full name of contributor Choiniere, Monique Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions USPTO	5)		

	MONEI	ARY POLITICAL (	CONTRIBUTIO	)NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/54 Rpt: 12/84	
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 10/31/2024	<ul><li>5 Full name of contributor Copeland, Dennis</li><li>6 Contributor address; City; S</li></ul>			7	Amount of Contribution (\$)	\$50.00
8	Principal occu Not Employe	Dripping Springs, TX 786 pation / Job title (See Instructionsed		Employer (See Instructions     Not Employed	5)		
	Date 10/31/2024	Full name of contributor Corsa, Audrey Contributor address; City; S Santa Monica, CA 90405	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$10.00
			Employer (See Instructions Not Employed	<u> </u> 			
	Date 11/02/2024	Full name of contributor Criss, Susan Contributor address; City; S	out-of-state PAC (ID#:_	)	•	Amount of Contribution (\$)	\$100.00
	Principal occu	Salado, TX 76571 pation / Job title (See Instructions	<u> </u>	Employer (See Instructions	<u>'</u>		
	Lawyer	pation 7 300 title (See Instructions	5)	Criss & Rousseau Law		m.L.L.P.	
	Date 10/31/2024	Full name of contributor Cronsberg, Sandra Contributor address; City; S Mill Valley, CA 94941	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$15.00
	Principal occu Ballet Teach	pation / Job title (See Instructions	5)	Employer (See Instructions Self Employed	<u> </u> s)		
	Date 10/30/2024	Full name of contributor Crossman, Brook Contributor address; City; S Colts Neck, NJ 07722	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$10.00
	Principal occu Environment	pation / Job title (See Instructions al Engineer	5)	Employer (See Instructions MEC	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	N	IS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 10/54 Rpt: 13/84	
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 11/10/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$6.00
8	Principal occu Musician	Encino, CA 91436 pation / Job title (See Instructions)	9	Employer (See Instructions Self Employed	<b>S</b> )		
	Date 10/27/2024	Full name of contributor out-of-state PAC (ID#:_ Darrouzet, Jennifer  Contributor address; City; State; Zip Code  Austin, TX 78759			•	Amount of Contribution (\$)	\$100.00
	Principal occu Software	pation / Job title (See Instructions)		Employer (See Instructions uStudio	<u>l</u> s)		
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#:_ Davila, Juan Contributor address; City; State; Zip Code		)	•	Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	Harker Heights, TX 76548 pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u> s)		
	Date 11/03/2024	Full name of contributor out-of-state PAC (ID#: Davis, Chet Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	Laguna Vista, TX 78578 pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u> s)		
	Date 11/02/2024	Full name of contributor out-of-state PAC (ID#:_ Dickinson, Jordan (Rev.)  Contributor address; City; State; Zip Code  Dorset, VT 05251				Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to	o complete this form	n.	1	Total pages Schedule A1: Sch: 11/54 Rpt: 14/84	
2	FILER NAME Lee, Jennifer	r A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 10/31/2024	<ul><li>5 Full name of contributor</li><li>Dillon, Christine</li><li>6 Contributor address; City; State</li></ul>	out-of-state PAC (ID#: ; Zip Code	)	7	Amount of Contribution (\$)	\$25.00
8	Dringinal occur	San Bruno, CA 94066 pation / Job title (See Instructions)	l <sub>o</sub>	Employer (See Instructions			
0	Not Employe		9	Not Employed	')		
	Date 10/31/2024	Full name of contributor  Dobberlin, Leslie  Contributor address; City; State		)		Amount of Contribution (\$)	\$50.00
		Portland , OR 97211			_		
	Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 10/29/2024	Full name of contributor  Drucker, Diana  Contributor address; City; State	out-of-state PAC (ID#:;	)		Amount of Contribution (\$)	\$5.00
		Ithica, NY 14850					
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	5)		
	Date 10/31/2024	Full name of contributor  Drucker, Diana  Contributor address; City; State  Ithica, NY 14850	out-of-state PAC (ID#: e; Zip Code	)		Amount of Contribution (\$)	\$5.00
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	)		
	Date 10/28/2024	Full name of contributor  Dykstra, Dewey  Contributor address; City; State  Boise, ID 83712	out-of-state PAC (ID#:;	)		Amount of Contribution (\$)	\$10.00
		pation / Job title (See Instructions)		Employer (See Instructions	()		
	Relieu Phys	ics Professor		Boise State University			

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDULE	<b>A1</b>
	The Instruc	ction Guide explains how to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 12/54 Rpt: 15/84	
2	FILER NAME Lee, Jennife	· A.			3	Filer ID (Ethics Commission 00088259	Filers)
4	Date 10/28/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$5.00
_		Hyattsville, DC 20782	_				
8	Principal occu Attorney	pation / Job title (See Instructions)	9	Employer (See Instructions Government	5)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_Edwards, Camille  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$5.00
	Principal occu	Hyattsville, DC 20782 pation / Job title (See Instructions)		Employer (See Instructions	 ;)		
	Attorney	,		Government	,		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:_ Egg, Richard  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$25.00
		Salado, TX 76571					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#:_Estudillo, Charles  Contributor address; City; State; Zip Code  Sonoma, CA 95476				Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 11/02/2024	Full name of contributor out-of-state PAC (ID#:_Faust, Judith  Contributor address; City; State; Zip Code  New Orleans, LA 70118		)		Amount of Contribution (\$)	\$30.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDULE	<b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 13/54 Rpt: 16/84	
2	FILER NAME Lee, Jennifer	· A.			3	Filer ID (Ethics Commission 00088259	Filers)
4	Date 11/03/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	New Orleans, LA 70118 pation / Job title (See Instructions)	9	Employer (See Instructions	 ;)		
	Not Employe			Not Employed			
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#:_Faust, Judith  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$30.00
		New Orleans, LA 70118					
	Principal occur  Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date	Full name of contributor  out-of-state PAC (ID#:_		Not Employed	Π	Amount of Contribution (\$)	
	11/04/2024	Fergus, Jim				yanoun or continuation (p)	\$25.00
		Tumacacori, AZ 85640					
	Principal occu Writer	pation / Job title (See Instructions)		Employer (See Instructions Self Employer	5)		
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#:_Fergus, Jim  Contributor address; City; State; Zip Code  Tumacacori, AZ 85640		)		Amount of Contribution (\$)	\$10.00
	Principal occu Writer	pation / Job title (See Instructions)		Employer (See Instructions Self Employer	5)		
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#:_Field, John  Contributor address; City; State; Zip Code  Newton, CT 06470	••••			Amount of Contribution (\$)	\$50.00
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/54 Rpt: 17/84	
2	FILER NAME Lee, Jennife			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 11/10/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Fine, Mary Ellen</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$)	\$4.16
_	<u> </u>	Austin, TX 78745	10 5 1 10 11 11			
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions None	i) 		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_Fine, Mary Ellen Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$4.16
		Austin, TX 78745 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		None			
	Date 10/30/2024	Full name of contributor out-of-state PAC (ID#:_ Fleck, Stephanie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Waban, MA 02468				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	5)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_Floyd, Martin  Contributor address; City; State; Zip Code  Simi Valley, CA 93065			Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	<u> </u>		
	Date 10/30/2024	Full name of contributor out-of-state PAC (ID#:_Foss, Linda  Contributor address; City; State; Zip Code  Austin, TX 78715			Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	()		

	MONET	ARY POLITICAL CONTRIBUT	TION	IS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete th	nis for	m.	1	Total pages Schedule A1: Sch: 15/54 Rpt: 18/84	
2	FILER NAME Lee, Jennifer	r A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 11/01/2024	<ul> <li>Full name of contributor  out-of-state PAC (Foss, Linda</li> <li>Contributor address; City; State; Zip Code</li> </ul>			7	Amount of Contribution (\$)	\$50.00
8	Principal occur	Austin, TX 78715 pation / Job title (See Instructions)	9	Employer (See Instructions	<u>s)</u>		
	Not Employe			Not Employed	-,		
	Date 11/05/2024	Full name of contributor out-of-state PAC ( Foss, Linda Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$50.00
	Deinsinal assu	Austin, TX 78715		Franksian (Caa kastuustians	<u></u>		
	Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 10/31/2024	Full name of contributor out-of-state PAC ( Frazier, Janice  Contributor address; City; State; Zip Code	(ID#:			Amount of Contribution (\$)	\$5.00
		Newark, NJ 07103					
	Principal occu Analysis	pation / Job title (See Instructions)		Employer (See Instructions Healthcare Company	s)		
	Date 10/27/2024	Full name of contributor out-of-state PAC ( Frick, Gina Contributor address; City; State; Zip Code  Belton, TX 76513		)	•	Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u>I</u> S)		
	Date 11/03/2024	Full name of contributor out-of-state PAC ( Gartner, Daniel  Contributor address; City; State; Zip Code  Oro Valley, AZ 85755	(ID#:		•	Amount of Contribution (\$)	\$10.00
	Principal occu None	pation / Job title (See Instructions)		Employer (See Instructions none	S)		
			•				

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDULI	<b>■ A1</b>
	The Instruc	ction Guide explains how to co	omplete this forr	m.	1	Total pages Schedule A1: Sch: 16/54 Rpt: 19/84	
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 10/30/2024	Gibbons, Heidi	of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$25.00
_	Deireitada	Austin, TX 78703		Farada e a (O a de atroctico	<u></u>		
8	Consultant	pation / Job title (See Instructions)	9	Employer (See Instructions Retired	5)		
	Date 10/31/2024	Giugni, Christine  Contributor address; City; State; Zip		)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Training Mar	nager		AMA			
	Date 10/27/2024	Full name of contributor out- Godfrey, Justin Contributor address; City; State; Zip	of-state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
		Austin, TX 78721					
	Principal occu Vice Preside	pation / Job title (See Instructions) nt/Treasurer		Employer (See Instructions Barilla Management Inc			
	Date 11/03/2024	Godfrey, Justin		)		Amount of Contribution (\$)	\$25.00
	Principal occu Vice Preside	pation / Job title (See Instructions) nt/Treasurer		Employer (See Instructions Barilla Management Inc			
	Date 11/04/2024	Gomez, Laura	of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions South Texas College	5)		
	-						

	MONET	ARY POLITICAL CONTRIBUTION	ON	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 17/54 Rpt: 20/84	
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 10/27/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$5.00
_	Deignaignal	Plano, TX 75074	ام	Fandayar (Caa Instruction			
8	Consultant	pation / Job title (See Instructions)	9	Employer (See Instructions Sogeti	5)		
	Date 11/04/2024	Contributor address; City; State; Zip Code		)	•	Amount of Contribution (\$)	\$10.00
	Principal occu	New Orleans, LA 70118 pation / Job title (See Instructions)	Τ	Employer (See Instructions	 s)		
	Not Employe	d		Not Employed			
	Date 11/05/2024	Full name of contributor				Amount of Contribution (\$)	\$25.00
		New Orleans, LA 70118					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 11/02/2024	Full name of contributor out-of-state PAC (ID# Gorton, Nick (Dr.)  Contributor address; City; State; Zip Code  Davis, CA 95616		)	•	Amount of Contribution (\$)	\$250.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions California Emergency P		sicians	
	Date 11/03/2024	Full name of contributor out-of-state PAC (ID# Gorton, Nick (Dr.)  Contributor address; City; State; Zip Code  Davis, CA 95616	:			Amount of Contribution (\$)	\$250.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions California Emergency P		sicians	
	· ·		<u> </u>	. 3 3.			

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDULI	<b>■ A1</b>
	The Instru	ction Guide explains how to con	nplete this form	n.	1	Total pages Schedule A1: Sch: 18/54 Rpt: 21/84	
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 11/03/2024	Graziano, Daniel	-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$5.00
_		Cambridge, MA 02141			_		
8	Principal occu Researcher	pation / Job title (See Instructions)	9	Employer (See Instructions Novartis	5)		
	Date 10/28/2024	Full name of contributor out-of Greg, Linden Contributor address; City; State; Zip C		)		Amount of Contribution (\$)	\$50.00
	Deinsinal assu	Oakland, CA 94602		Franks on (Cas Instructions	<u></u>		
	Researcher	pation / Job title (See Instructions)		Employer (See Instructions UC Berkeley	5)		
	Date 11/03/2024	Full name of contributor out-of Gregory, James Contributor address; City; State; Zip C				Amount of Contribution (\$)	\$25.00
		Dublin, OK 43016					
	Principal occu Sales	pation / Job title (See Instructions)		Employer (See Instructions GDT	s)		
	Date 10/29/2024	Griggs, Sandra	-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Killeen ISD	<u> </u> 5)		
	Date 11/01/2024	Full name of contributor out-of Grumwald, George Contributor address; City; State; Zip C	-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
			l				

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDULE	E <b>A1</b>
	The Instruc	ction Guide explains how to con	nplete this form	n.	1	Total pages Schedule A1: Sch: 19/54 Rpt: 22/84	
2	FILER NAME Lee, Jennifer	· A.			3	Filer ID (Ethics Commission 00088259	r Filers)
4	Date 11/03/2024	Gruskos, Alexandra	-state PAC (ID#:		7	Amount of Contribution (\$)	\$50.00
_	Dringing Lagour	Pittsburg, PA 15208	lo.	Franksian (Caa Instructions	<u></u>		
8	Not Employe	pation / Job title (See Instructions) d	9	Employer (See Instructions Not Employed	5)		
	Date 11/10/2024	Full name of contributor out-of Hadsall, Marvin  Contributor address; City; State; Zip C				Amount of Contribution (\$)	\$25.00
		TEMPLE, TX 76502					
	Principal occup Tax Manage	pation / Job title (See Instructions) r		Employer (See Instructions McLane	5)		
	Date 11/03/2024	Full name of contributor out-of Hanes, Jenna Contributor address; City; State; Zip C	-state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
		Austin, TX 78751					
	Principal occup Policy Adviso	pation / Job title (See Instructions) or		Employer (See Instructions City of Austin	s)		
	Date 12/03/2024	Hanes, Jenna	-state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions City of Austin	5)		
	Date 10/29/2024	Hansen, Peter	-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occup Lawyer	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	5)		

	MONET	ARY POLITICAL (	CONTRIBUTIO	N	S		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 20/54 Rpt: 23/84	
2	FILER NAME Lee, Jennifer	r A.				3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 10/29/2024	<ul><li>5 Full name of contributor Harslem, Eric</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$500.00
8	Dringing aggr	Austin, TX 78746	.,		Employer (See Instructions	<u></u>		
0	Not Employe	pation / Job title (See Instructions ed	,,		Not Employed	·)		
	Date 10/27/2024	Full name of contributor Hartman, Eric Contributor address; City; S			)		Amount of Contribution (\$)	\$25.00
	Principal occur	Austin, TX 78703 pation / Job title (See Instructions	9		Employer (See Instructions	:) 		
	Not Employe		,,		Not Employed	,,		
	Date 10/31/2024	Full name of contributor Hendrickson, Sharon Contributor address; City; S	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$18.40
		Avondale, AZ 85392						
	Principal occu Not Employe	pation / Job title (See Instructionsed	(5)		Employer (See Instructions Not Employed	5)		
	Date 11/01/2024	Full name of contributor Hendrickson, Sharon Contributor address; City; S Avondale, AZ 85392	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$18.40
	Principal occu Not Employe	pation / Job title (See Instructions ed	s)		Employer (See Instructions Not Employed	5)		
	Date 11/03/2024	Full name of contributor Hendrickson, Sharon Contributor address; City; S Avondale, AZ 85392	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$18.40
	Principal occu Not Employe	pation / Job title (See Instructions	5)		Employer (See Instructions Not Employed	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ON	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 21/54 Rpt: 24/84	
2	FILER NAME Lee, Jennifer	r A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 11/03/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$500.00
8		Charlottsville, VA 22903 pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID# Henley, Donald Contributor address; City; State; Zip Code Charlottsville, VA 22903		Self Employed		Amount of Contribution (\$)	\$100.00
	Principal occu Musician	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	<u>s)</u>		
	Date 11/03/2024	Full name of contributor	:	)		Amount of Contribution (\$)	\$10.00
		New York, NY 10011 pation / Job title (See Instructions)	Τ	Employer (See Instructions	•		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID# Hildreth, John Contributor address; City; State; Zip Code  Austin, TX 78701		The Unemployed Philos	Sop	hers Guild Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u>l</u> S)		
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID# Hill, Jack Contributor address; City; State; Zip Code  Neptune City, NJ 07753			•	Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		

	MONEI	ARY POLITICAL (	CONTRIBUTIO	INS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 22/54 Rpt: 25/84	
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 10/27/2024	<ul><li>5 Full name of contributor Hiller, Jay</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$10.00
8	Principal occu Yoga Instruc		(5)	9 Employer (See Instructions LASR	5)		
	Date 11/04/2024	Full name of contributor Hitchcock, Daniel  Contributor address; City; S  Cape Coral, FL 33904	out-of-state PAC (ID#:	)	•	Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	(5)	Employer (See Instructions Not Employed	5)		
	Date 11/03/2024	Full name of contributor Holt, Patricia Contributor address; City; S	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$25.00
		Portland, OR 97217	, I	5 1 (0 1 1 1	Ĺ		
	Not Employe	pation / Job title (See Instructions ed	5)	Employer (See Instructions Not Employed	5)		
	Date 11/16/2024	Full name of contributor Hommel, Solange Contributor address; City; S Killeen, TX 76549-3756	out-of-state PAC (ID#:_	)	•	Amount of Contribution (\$)	\$50.00
	Principal occu Public relation	pation / Job title (See Instructions	s)	Employer (See Instructions Hamumu Games Inc	<u>l</u> S)		
	Date 10/28/2024	Full name of contributor Hu, Deqiang Contributor address; City; Si New Canaan, CT 06840	out-of-state PAC (ID#:_		•	Amount of Contribution (\$)	\$25.00
	Principal occu Software En	pation / Job title (See Instructions gineer	5)	Employer (See Instructions Allscripts	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 23/54 Rpt: 26/84	
2	FILER NAME Lee, Jennife			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 11/03/2024	Full name of contributor	)	7	Amount of Contribution (\$)	\$10.00
_	<u> </u>	Lakewood, CA 90712				
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions) GGUSD	)		
	Date 11/03/2024	Full name of contributor out-of-state PAC (ID#:_ Jatko, Brent  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3.00
	Principal occu	Houston, TX 77035  upation / Job title (See Instructions)	Employer (See Instructions	)		
	Not Employe		Not Employed			
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#: Jensen, Robyn Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Rancho Palos Verdes, TX 90275				
	Principal occu Interior Desi	pation / Job title (See Instructions) gner	Employer (See Instructions Self Employed	)		
	Date 11/03/2024	Full name of contributor out-of-state PAC (ID#:_ Jimeno, Carol  Contributor address; City; State; Zip Code  Blaine, WA 98230			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	)		
	Date 10/27/2024	Full name of contributor out-of-state PAC (ID#:_ Jones, Melissa  Contributor address; City; State; Zip Code  Austin, TX 78703	)		Amount of Contribution (\$)	\$100.00
	Principal occu Not employe	pation / Job title (See Instructions)	Employer (See Instructions Not employed	)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	Ν	S		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 24/54 Rpt: 27/84	
2	FILER NAME Lee, Jennife	r A.				3	Filer ID (Ethics Commission 00088259	Filers)
4	Date 11/03/2024	<ul><li>5 Full name of contributor Josimovich, Lois</li><li>6 Contributor address; City; St.</li></ul>	out-of-state PAC (ID#:		)	7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Cambridge, MA 02238 pation / Job title (See Instructions	, I	<u> </u>	Employer (See Instructions	-, 		
0	Nonprofit fun		)	9	MAPS	·)		
	Date 11/05/2024	Full name of contributor Josimovich, Lois Contributor address; City; St			)		Amount of Contribution (\$)	\$10.00
	Dringing aggr	Cambridge, MA 02238 pation / Job title (See Instructions	, T		Employer (See Instructions	<u>''</u>		
	Nonprofit fun		)		Employer (See Instructions MAPS	s)		
	Date 11/03/2024	Full name of contributor Kagan, Jeremy Contributor address; City; St	out-of-state PAC (ID#:_		)		Amount of Contribution (\$)	\$36.00
		Los Angels, CA 90049						
	Principal occu Filmmaker/ F	pation / Job title (See Instructions Professor			Employer (See Instructions OOC/USC	s)		
	Date 11/04/2024	Full name of contributor Kagan, Jeremy Contributor address; City; St					Amount of Contribution (\$)	\$36.00
	Principal occu Filmmaker/ F	pation / Job title (See Instructions Professor	)		Employer (See Instructions OOC/USC	5)		
	Date 10/31/2024	Full name of contributor Kane, David Contributor address; City; St Davis, CA 95616	out-of-state PAC (ID#:_		)	•	Amount of Contribution (\$)	\$10.00
		pation / Job title (See Instructions	)		Employer (See Instructions Admail West, INC.	s)		
	Software De	velopei			AMITALI WEST, INC.			

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 25/54 Rpt: 28/84	
2	FILER NAME Lee, Jennifer	r A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 11/03/2024	<ul><li>5 Full name of contributor Kolodziejczyk, Belva</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: atte; Zip Code	)	7	Amount of Contribution (\$)	\$100.00
8	Principal occur	Gatesville, TX 76528 pation / Job title (See Instructions)	la.	Employer (See Instructions	·/ 		
0	Not Employe		9	Not Employed	)		
	Date 11/11/2024	Full name of contributor Korth-Juricek, Ashley Contributor address; City; Sta				Amount of Contribution (\$)	\$50.00
		Austin, TX 78752					
	Principal occur Investor	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 12/11/2024	Full name of contributor Korth-Juricek, Ashley Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code	)		Amount of Contribution (\$)	\$50.00
		Austin, TX 78752					
	Principal occu Investor	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 10/31/2024	Full name of contributor Kristensen, Kate Contributor address; City; Sta Oakland, CA 94610	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 11/05/2024	Full name of contributor Langston, Aileen Contributor address; City; Sta Brooklyn, NY 11217	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions NYU	5)		

	MONET	ARY POLITICAL CONTRIBUT	ΓΙΟΝ	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete th	is for	m.	1	Total pages Schedule A1: Sch: 26/54 Rpt: 29/84	
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 10/29/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Parkersburg, TX 26101 pation / Job title (See Instructions)	9	Employer (See Instructions	 s)		
	Not Employe			Not Employed	,		
	Date 10/29/2024	Full name of contributor		)		Amount of Contribution (\$)	\$10.00
	D: : 1	Arlington, MA 02476		5 1 (0 1 1 1	<u></u>		
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		
	Date 11/05/2024	Full name of contributor out-of-state PAC (I Levin, Andrea  Contributor address; City; State; Zip Code	D#:	)		Amount of Contribution (\$)	\$10.00
	Principal occu	Lago Vista, TX 78645-2447 pation / Job title (See Instructions)	$\neg$	Employer (See Instructions	<u>                                      </u>		
	Project Mana			Self	,		
	Date 11/03/2024	Full name of contributor out-of-state PAC (I Levy, Sarah  Contributor address; City; State; Zip Code  San Diego, CA 92104				Amount of Contribution (\$)	\$5.00
	Principal occu Benefits Adn	pation / Job title (See Instructions) nin		Employer (See Instructions City of San Diego	5)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (I Lewis, Michael Contributor address; City; State; Zip Code Lockhart, TX 78644			•	Amount of Contribution (\$)	\$100.00
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Account Exe	Culive		WalkMe			

	MONET	ARY POLITICAL CONTRI	IBUTION	S		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to compl	ete this forr	n.	1	Total pages Schedule A1: Sch: 27/54 Rpt: 30/84	
2	FILER NAME Lee, Jennifer	^ A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 10/29/2024	<ul> <li>Full name of contributor  out-of-state  undsay, Cathleen</li> <li>Contributor address; City; State; Zip Code</li> </ul>			7	Amount of Contribution (\$)	\$5.00
_		Seattle, WA 98125					
8	Principal occu Physician	pation / Job title (See Instructions)	9	Employer (See Instructions Self Employed	5)		
	Date 10/28/2024	Linson, Andrea  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$25.00
	Principal occu	Hutto, TX 78634 pation / Job title (See Instructions)		Employer (See Instructions	5)		
	NRS IV			State of Texas			
	Date 11/03/2024	Lipchak, Oscar		)		Amount of Contribution (\$)	\$25.00
		Austin, TX 78704					
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	i)		
	Date 10/31/2024	Lockwood, Laura		)		Amount of Contribution (\$)	\$25.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions New Braunfels ISD	<u> </u>		
	Date 11/04/2024	Longfield, Amy		)		Amount of Contribution (\$)	\$25.00
	Principal occu Writer	pation / Job title (See Instructions)		Employer (See Instructions Self	<u> </u>		
			•				

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 28/54 Rpt: 31/84	
2	FILER NAME Lee, Jennifer	r A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 10/27/2024	Longley, Susan	out-of-state PAC (ID#: Zip Code	)	7	Amount of Contribution (\$)	\$100.00
8	Principal occur	Austin, TX 78703 pation / Job title (See Instructions)	l g	Employer (See Instructions	)		
_	Public Relati			Self-Employed			
	Date 11/02/2024	Full name of contributor	out-of-state PAC (ID#: Zip Code	)		Amount of Contribution (\$)	\$10.00
		Glenside, PA 19038	į				
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	)		
	Date 11/03/2024	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
		Spring Branch, TX 78070					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Century Regional Health		are	
	Date 10/29/2024	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$15.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	)		
	Date 11/03/2024	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$15.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	)		
			,				

	MONET	ARY POLITICAL CONTR	IBUTION	S		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to compl	lete this form	m.	1	Total pages Schedule A1: Sch: 29/54 Rpt: 32/84	
2	FILER NAME Lee, Jennifer	· A.			3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 11/04/2024	<ul> <li>Full name of contributor  out-of-star  Martin, Maurice</li> <li>Contributor address; City; State; Zip Code</li> </ul>			7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Temple, TX 76502 pation / Job title (See Instructions)	la	Employer (See Instructions	;) 		
•	Not Employe		ľ	Not Employed	"		
	Date 10/27/2024	Mayfield, Mark		)		Amount of Contribution (\$)	\$25.00
	Dringing aggr	Temple, TX 76501		Employer (See Instructions	<u></u>		
	Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
	Date 10/31/2024	Full name of contributor out-of-sta Mayfield, Mark Contributor address; City; State; Zip Code	e	)	•	Amount of Contribution (\$)	\$25.00
		Temple, TX 76501					
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
	Date 10/28/2024	McCall, Joan		)	•	Amount of Contribution (\$)	\$20.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 10/29/2024	Full name of contributor out-of-sta  McDowell, Johnnie  Contributor address; City; State; Zip Code  Leander, TX 78641	ate PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		
	F76						

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 30/54 Rpt: 33/84	
2	FILER NAME Lee, Jennife			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 11/02/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Leander, TX 78641 pation / Job title (See Instructions)	9 Employer (See Instructions			
•	Not Employe		Not Employed	,		
	Date 11/03/2024	Full name of contributor out-of-state PAC (ID#:_ McKay, Emily Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$25.00
		Washington, DC 20010 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Nonprofit co	nsultant	EGM Consulting			
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ McKnight, Barbara Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00
		Austin, TX 78704				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_McLarty, Davis  Contributor address; City; State; Zip Code  Austin, TX 78745	)		Amount of Contribution (\$)	\$100.00
	Principal occu Talent Agent	pation / Job title (See Instructions) t	Employer (See Instructions Self Employed	)		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:_ McWilliams, James  Contributor address; City; State; Zip Code  Killeen, TX 76549	)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions None	)		

	MONET	ARY POLITICAL COI	NTRIBUTION	S		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to o	complete this form	n.	1	Total pages Schedule A1: Sch: 31/54 Rpt: 34/84	
2	FILER NAME Lee, Jennifer	· A.			3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 12/01/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Killeen, TX 76549 pation / Job title (See Instructions)	lg	Employer (See Instructions	) 		
Ŭ	Not Employe		ľ	None	')		
	Date 10/28/2024	Full name of contributor		)		Amount of Contribution (\$)	\$20.00
		Austin, TX 78756					
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions University of Texas	<b>(</b> )		
	Date 10/28/2024	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
		Tucson, AZ 85712					
	Principal occup Not Emoploy	oation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	i)		
	Date 10/31/2024	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occup	oation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	i)		
	Date 11/01/2024	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occup	oation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
			L				

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to	o complete this form	n.	1	Total pages Schedule A1: Sch: 32/54 Rpt: 35/84	
2	FILER NAME Lee, Jennifer	r A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 11/03/2024	<ul><li>5 Full name of contributor Moore, Lisa Mia</li><li>6 Contributor address; City; State</li></ul>	out-of-state PAC (ID#:e; Zip Code	)	7	Amount of Contribution (\$)	\$5.00
_		Los Angels, CA 90046	1-				
8	Clinical Lab	pation / Job title (See Instructions) Scientist	9	Employer (See Instructions Cedars Sinai Medical Co		er	
	Date 11/04/2024	Full name of contributor  Moore, William  Contributor address; City; State  Bellingham, WA 98225				Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	ed		Not Employed			
	Date 10/28/2024	Full name of contributor  Murray, Douglas  Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code	)		Amount of Contribution (\$)	\$50.00
		Santa Cruz, CA 95061					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		
	Date 10/27/2024	Full name of contributor  Musselman, KT  Contributor address; City; State  Austin, TX 78717		)		Amount of Contribution (\$)	\$100.00
	Principal occu Justice of the	pation / Job title (See Instructions) e Peace		Employer (See Instructions Williamson County	()		
	Date 11/03/2024	Full name of contributor Myer, Tansy Contributor address; City; State Venice, CA 90291	out-of-state PAC (ID#:e; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Principal occu Art Director	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	i)		
			<u>'</u>				

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to com	plete this forr	m.	1	Total pages Schedule A1: Sch: 33/54 Rpt: 36/84	
2	FILER NAME Lee, Jennifer	· A.			3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 10/27/2024	<ul> <li>Full name of contributor  out-of-Navarro, Barbara</li> <li>Contributor address; City; State; Zip Contributor address; City; State</li> </ul>			7	Amount of Contribution (\$)	\$50.00
8	Principal occur	Magnolia, TX 77355 pation / Job title (See Instructions)	la la	Employer (See Instructions	:) 		
Ü	Social Worke		ľ	Harris County	)		
	Date 10/31/2024	Full name of contributor out-of- Neumann, David  Contributor address; City; State; Zip Co				Amount of Contribution (\$)	\$50.00
		Lake Oswego, OR 97035					
	Principal occu <sub>l</sub> Engineer	pation / Job title (See Instructions)		Employer (See Instructions Apple	s)		
	Date 11/04/2024	Full name of contributor out-of- Nguyen, Brian Contributor address; City; State; Zip Co	state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
		Leander, TX 78641					
	Principal occup Software Eng	pation / Job title (See Instructions) gineer		Employer (See Instructions NVIDIA Corporation	5)		
	Date 10/27/2024	Norris, Robert	state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occup Not Employe	oation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
	Date 11/02/2024	Novoa, Ben	state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	Principal occup	oation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
			I				

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 34/54 Rpt: 37/84	
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	Filers)
4	Date 11/05/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Novoa, Ben</li> <li>Contributor address; City; State; Zip Code</li> </ul>			7	Amount of Contribution (\$)	\$25.00
8	Principal occu Not Employe	Merrillville, IN 46411 pation / Job title (See Instructions)	9	Employer (See Instructions Not Employed	<u> </u> s)		
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#:_Oertel, Lauren		)		Amount of Contribution (\$)	\$8.34
	Principal occu Organizer	pation / Job title (See Instructions)		Employer (See Instructions Indivisible	<u>l</u> S)		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:_ Owen, Mike  Contributor address; City; State; Zip Code		)	•	Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	Lynnwood, WA 98036 pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u> s)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_Palencia, April  Contributor address; City; State; Zip Code  Santa Barbara, CA 93110		)	•	Amount of Contribution (\$)	\$5.00
	Principal occu Architect	pation / Job title (See Instructions)		Employer (See Instructions Vanguard Planning Gro			
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#:_ Patterson, David Contributor address; City; State; Zip Code Brooklyn, NY 11231				Amount of Contribution (\$)	\$5.00
	Principal occu Literary Ager	pation / Job title (See Instructions) nt		Employer (See Instructions SKLA	5)		

	MONET	ARY POLITICAL CO		SCHEDULE A1			
	The Instruc	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 35/54 Rpt: 38/84	
2	FILER NAME Lee, Jennifer	r A.			3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 11/03/2024	Patterson, David  6 Contributor address; City; State;	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$5.00
8	Principal occu	Brooklyn, NY 11231 pation / Job title (See Instructions)	9	Employer (See Instructions	)		
	Literary Ager	nt		SKLA			
	Date 10/28/2024	Full name of contributor  Patton, Jo  Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
		Ft. Worth, TX 76108					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	Not Employe			Not Employed			
	Date 11/03/2024	Full name of contributor Pena, Jose F. (Dr.)  Contributor address; City; State;	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
		McAllen, TX 78504					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Donna Medical Center	)		
	Date 11/05/2024	Full name of contributor Pena, Jose F. (Dr.)  Contributor address; City; State;  McAllen, TX 78504		)		Amount of Contribution (\$)	\$25.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Donna Medical Center	)		
	Date 11/03/2024	Full name of contributor  Peppito, Julia  Contributor address; City; State;  Brooklyn, NY 11218	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Artist	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	)		
			ı				

	MONET	ONETARY POLITICAL CONTRIBUTIONS			SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this 1	form.	1	Total pages Schedule A1: Sch: 36/54 Rpt: 39/84	
2	FILER NAME Lee, Jennife			3	Filer ID (Ethics Commissio 00088259	n Filers)
4	Date 11/03/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Peterson, Hope</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Houston, TX 77027  pation / Job title (See Instructions)	9 Employer (See Instructions			
_	Teacher/The		Self Employed	,		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_Petty, Melissa  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Honolulu, HI 96825  pation / Job title (See Instructions)	Employer (See Instructions	)		
	Not Employe		None			
	Date 11/29/2024	Full name of contributor out-of-state PAC (ID#: Petty, Melissa  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$250.00
		Honolulu, HI 96825				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions None	)		
	Date 12/29/2024	Full name of contributor out-of-state PAC (ID#:_ Petty, Melissa Contributor address; City; State; Zip Code Honolulu, HI 96825			Amount of Contribution (\$)	\$250.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions None	)		
	Date 11/03/2024	Full name of contributor out-of-state PAC (ID#:_Powers, Sheryl  Contributor address; City; State; Zip Code  New Waverly, TX 77358			Amount of Contribution (\$)	\$25.00
	Principal occu SAIC	pation / Job title (See Instructions)	Employer (See Instructions En route instructor	)		

	MONET	ARY POLITICAL CONTRI		SCHEDULE A1			
	The Instruc	ction Guide explains how to comple	ete this for	n.	1	Total pages Schedule A1: Sch: 37/54 Rpt: 40/84	
2	FILER NAME Lee, Jennifer	r A.			3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 11/03/2024	<ul> <li>Full name of contributor  out-of-state</li> <li>Pressman, Karen</li> <li>Contributor address; City; State; Zip Code</li> </ul>			7	Amount of Contribution (\$)	\$25.00
8	Principal occur	Boston, MA 02116 pation / Job title (See Instructions)	a	Employer (See Instructions	z)		
Ü	Not Employe		ľ	Not Employed	۰)		
	Date 10/29/2024	Pureka, Michael		)		Amount of Contribution (\$)	\$25.00
	Dein sin al annu	Cambridge, MA 02139		Fundament (On a location at least			
	Software En	pation / Job title (See Instructions) gineer		Employer (See Instructions Nanthealth, INC.	5)		
	Date 10/28/2024	Full name of contributor out-of-state Rabroker, Timothy Contributor address; City; State; Zip Code	e PAC (ID#:		•	Amount of Contribution (\$)	\$25.00
		Killeen, TX 76542					
	Principal occu Firefighter	pation / Job title (See Instructions)		Employer (See Instructions City of Killeen	s)		
	Date 10/30/2024	Rabroker, Timothy		)		Amount of Contribution (\$)	\$2.00
	Principal occu Firefighter	pation / Job title (See Instructions)		Employer (See Instructions City of Killeen	5)		
	Date 10/30/2024	Full name of contributor out-of-state Rabroker, Timothy Contributor address; City; State; Zip Code Killeen, TX 76542	e PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
	Principal occu Firefighter	pation / Job title (See Instructions)		Employer (See Instructions City of Killeen	5)		
			ı				

	MONET	ARY POLITICAL CONTRIBU		SCHEDULE A1			
	The Instruc	ction Guide explains how to complete t	his for	n.	1	Total pages Schedule A1: Sch: 38/54 Rpt: 41/84	
2	FILER NAME Lee, Jennife	· A.			3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 10/31/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$10.00
_		Killeen, TX 76542			_		
8	Principal occu Firefighter	pation / Job title (See Instructions)	9	Employer (See Instructions City of Killeen	5)		
	Date 11/01/2024	Full name of contributor out-of-state PAC Rabroker, Timothy  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$3.00
	Dringing! goog	Killeen, TX 76542		Employer (See Instructions	<u>,,</u>		
	Firefighter	pation / Job title (See Instructions)		Employer (See Instructions City of Killeen	o)		
	Date 11/02/2024	Full name of contributor out-of-state PAC Rabroker, Timothy  Contributor address; City; State; Zip Code	(ID#:	)		Amount of Contribution (\$)	\$5.00
		Killeen, TX 76542					
	Principal occu Firefighter	pation / Job title (See Instructions)		Employer (See Instructions City of Killeen	s)		
	Date 11/02/2024	Full name of contributor out-of-state PAC Rabroker, Timothy Contributor address; City; State; Zip Code Killeen, TX 76542		)	•	Amount of Contribution (\$)	\$5.00
	Principal occu Firefighter	pation / Job title (See Instructions)		Employer (See Instructions City of Killeen	5)		
	Date 11/03/2024	Full name of contributor out-of-state PAC Rabroker, Timothy  Contributor address; City; State; Zip Code  Killeen, TX 76542	C (ID#:		•	Amount of Contribution (\$)	\$5.00
	Principal occu Firefighter	pation / Job title (See Instructions)		Employer (See Instructions City of Killeen	s)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUL	E <b>A1</b>	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 39/54 Rpt: 42/84	
2	FILER NAME Lee, Jennife			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 11/04/2024	5 Full name of contributor out-of-state PAC (ID#:_ Rabroker, Timothy  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$5.00
_		Killeen, TX 76542				
8	Principal occu Firefighter	pation / Job title (See Instructions)	9 Employer (See Instructions) City of Killeen	)		
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_Rabroker, Timothy  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00
	Dringing aggr	Killeen, TX 76542	Employer (Co.) Instructions			
	Firefighter	pation / Job title (See Instructions)	Employer (See Instructions City of Killeen	)		
	Date 11/20/2024	Full name of contributor out-of-state PAC (ID#:_ Raffaelli, Paulo Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$2.08
		San Francisco, CA 94112				
	Principal occu Engineer	pation / Job title (See Instructions)	Employer (See Instructions Cisco Meraki	)		
	Date 12/20/2024	Full name of contributor out-of-state PAC (ID#:_ Raffaelli, Paulo Contributor address; City; State; Zip Code San Francisco, CA 94112	)		Amount of Contribution (\$)	\$2.08
	Principal occu Engineer	pation / Job title (See Instructions)	Employer (See Instructions Cisco Meraki	)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_Ramey, Jeannie  Contributor address; City; State; Zip Code  Cambridge, MA 02139			Amount of Contribution (\$)	\$100.00
	Principal occu Executive	pation / Job title (See Instructions)	Employer (See Instructions Synapse	)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS	SCHEDULE A	۱1
	The Instru	ction Guide explains how	to complete this fo	rm.	1 Total pages Schedule A1: Sch: 40/54 Rpt: 43/84	
2	FILER NAME Lee, Jennife	r A.			3 Filer ID (Ethics Commission File 00088259	rs)
4	Date 11/03/2024	<ul><li>Full name of contributor Rasor, Carol</li><li>Contributor address; City; St</li></ul>	out-of-state PAC (ID#:		7 Amount of Contribution (\$) \$	25.00
8	Principal occu	Lawrence, KS 66047	<u>.)</u>	9 Employer (See Instructions	(5)	
	Not Employe		,	Not Employed		
	Date 10/29/2024	Full name of contributor Ray, Linda Contributor address; City; St			Amount of Contribution (\$)	50.00
_	Principal occu	Washington , DC 20009  pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u>	
	Attourney	panon, cos uno (coo monuono	,	Federal Communication		
	Date 11/01/2024	Full name of contributor Ray, Linda Contributor address; City; St	out-of-state PAC (ID#:	)	Amount of Contribution (\$) \$	50.00
		Washington , DC 20009				
	Principal occu Attourney	pation / Job title (See Instructions	)	Employer (See Instructions Federal Communication		
	Date 11/04/2024	Full name of contributor Ray, Linda  Contributor address; City; St  Washington , DC 20009		)	Amount of Contribution (\$)	50.00
	Principal occu Attourney	pation / Job title (See Instructions	)	Employer (See Instructions Federal Communication		
	Date 10/27/2024	Full name of contributor Reinken, Janis Contributor address; City; St Austin, TX 78755	out-of-state PAC (ID#:	)	Amount of Contribution (\$)	\$7.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	)	Employer (See Instructions Not Employed	;)	
			•			

	MONET	ARY POLITICAL CONTRI		SCHEDULE A1			
	The Instruc	ction Guide explains how to compl	lete this forr	n.	1	Total pages Schedule A1: Sch: 41/54 Rpt: 44/84	
2	FILER NAME Lee, Jennifer	· A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 11/01/2024	<ul> <li>Full name of contributor  out-of-star</li></ul>		)	7	Amount of Contribution (\$)	\$20.00
0	Dringing occur	Austin, TX 78745	lo lo	Employer (See Instructions	<u></u>		
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions ATT	5)		
	Date 10/29/2024	Rodriguez, Raymond		)		Amount of Contribution (\$)	\$100.00
	Principal occu	Hutton, TX 78934 pation / Job title (See Instructions)		Employer (See Instructions	 s)		
	Realtor			LPT Realty			
	Date 10/29/2024	Full name of contributor out-of-sta	e	)	•	Amount of Contribution (\$)	\$25.00
		DeKalb, IL 60115					
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
	Date 10/29/2024	Romar, George		)	•	Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 10/27/2024	Rusk, Mitzi	te PAC (ID#:	)	•	Amount of Contribution (\$)	\$27.00
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	s)		
			•				

	MONEI	NETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 42/54 Rpt: 45/84		
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	n Filers)	
4	Date 11/01/2024	<ul><li>5 Full name of contributor Rusk, Mitzi</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:ate; Zip Code		7	Amount of Contribution (\$)	\$27.00	
8	Principal occu Not employe	Tyler, TX 75703  pation / Job title (See Instructionsed	) 9	Employer (See Instructions Not employed	<u> </u> s)			
	Date 11/03/2024	Full name of contributor Rutishauser, Robert  Contributor address; City; St  Austin, TX 78731	out-of-state PAC (ID#: ate; Zip Code	)	•	Amount of Contribution (\$)	\$100.00	
	Principal occu Not Employe	pation / Job title (See Instructions ed	)	Employer (See Instructions Not Employed	5)			
	Date 12/03/2024	Full name of contributor Rutishauser, Robert Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code	)		Amount of Contribution (\$)	\$100.00	
	Deinsinal assu	Austin, TX 78731	<b>\</b>	Franks var (Caa kastuvationa	<u></u>			
	Not Employe	pation / Job title (See Instructions ed	)	Employer (See Instructions Not Employed	>)			
	Date 10/27/2024	Full name of contributor Ruud, Chris Contributor address; City; St Austin, TX 78705	out-of-state PAC (ID#: ate; Zip Code		•	Amount of Contribution (\$)	\$50.00	
	Principal occu Not Employe	pation / Job title (See Instructions ed	)	Employer (See Instructions Not Employed	5)			
	Date 10/30/2024	Full name of contributor Salas-Porras, Ana Luisa Contributor address; City; St Austin, TX 78756-2912	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$100.00	
	Principal occu Not Employe	pation / Job title (See Instructions ed		Employer (See Instructions None	S)			

	MONET	ARY POLITICAL CONTI	RIBUTION	S		SCHEDULE	E <b>A1</b>
	The Instruc	ction Guide explains how to com	plete this forr	m.	1	Total pages Schedule A1: Sch: 43/54 Rpt: 46/84	
2	FILER NAME Lee, Jennifer	· A.			3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 10/31/2024	<ul> <li>Full name of contributor  out-of-s</li> <li>Scott, Val</li> <li>Contributor address; City; State; Zip Co</li> </ul>			7	Amount of Contribution (\$)	\$5.00
_		Greenfield, MA 01301					
8	Not Employe	pation / Job title (See Instructions) d	9	Employer (See Instructions Not Employed	5)		
	Date 10/31/2024	Full name of contributor out-of-s Sharma, Sangeeta Contributor address; City; State; Zip Co				Amount of Contribution (\$)	\$25.00
	Principal occur	Scarsdale, NY 10583 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	Doctor	oduon 7 dob uno (oce mondenons)		NYC HHC	',		
	Date 11/03/2024	Full name of contributor out-of-s Sheikholeslami, Bahram Contributor address; City; State; Zip Co	state PAC (ID#: ode	)		Amount of Contribution (\$)	\$25.00
		Houston , TX 77079					
	Principal occu not Employe	oation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 10/29/2024	Sherman, Chris				Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions C Sherman AV	<u>(</u>		
	Date 10/31/2024	Sherman, Chris	state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Owner	oation / Job title (See Instructions)		Employer (See Instructions C Sherman AV	5)		
			1				

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 44/54 Rpt: 47/84	
2	FILER NAME Lee, Jennifer	· A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 10/28/2024	Shulman, Susan	out-of-state PAC (ID#: Zip Code	)	7	Amount of Contribution (\$)	\$25.00
		Highland Park, IL 60035	,				
8	Principal occu Lawyer	pation / Job title (See Instructions)		Employer (See Instructions North Suburban Legal A		Clinic	
	Date 10/27/2024	Full name of contributor  Sisco, Garry  Contributor address; City; State;		)		Amount of Contribution (\$)	\$25.00
	Principal occur	Temple, TX 76502 pation / Job title (See Instructions)		Employer (See Instructions	<u>.</u>		
	Tax Prepare			HR Block	,		
	Date 10/29/2024	Full name of contributor  Smith, Chuck  Contributor address; City; State;	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$250.00
		Austin, TX 78703					
	Principal occu Director	pation / Job title (See Instructions)		Employer (See Instructions Pease Park Conservance	•		
	Date 10/29/2024	Smith, Susan		)		Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	)		
	Date 10/27/2024	Full name of contributor  Spain, Diana  Contributor address; City; State;  Austin, TX 78751	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$2.08
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		

	MONEI	NETARY POLITICAL CONTRIBUTIONS				SCHEDULE A			
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 45/54 Rpt: 48/84			
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	Filers)		
4	Date 11/26/2024	<ul><li>5 Full name of contributor Spain, Diana</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#: tate; Zip Code		7	Amount of Contribution (\$)	\$2.50		
8	Principal occu Not Employe		(5)	9 Employer (See Instructions Not Employed	<u> </u> s)				
	Date 12/26/2024	Full name of contributor Spain, Diana Contributor address; City; S Austin, TX 78751	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$2.08		
	Principal occu Not Employe	pation / Job title (See Instructions ed	5)	Employer (See Instructions Not Employed	5)				
	Date 10/29/2024	Full name of contributor Spears, Jesse Contributor address; City; S	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00		
	Dringing! goog	Austin, TX 78735 pation / Job title (See Instructions		Employer (See Instructions	<u>,,</u>				
	Software De		5)	Retro Studios	·)				
	Date 10/27/2024	Full name of contributor Stading, Tycha Contributor address; City; S Austin, TX 78731	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00		
	Principal occu Not Employe	pation / Job title (See Instructions ed	5)	Employer (See Instructions Not Employed	5)				
	Date 11/02/2024	Full name of contributor Starks, Nikki Contributor address; City; S Belton, TX 76513	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$10.00		
	Principal occu Not Employe	pation / Job title (See Instructions ed	5)	Employer (See Instructions Not Employed	s)				

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1				
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 46/54 Rpt: 49/84	
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 7  11/04/2024 Starks, Nikki  6 Contributor address; City; State; Zip Code  Belton, TX 76513		7	Amount of Contribution (\$)	\$10.00		
8	Principal occu Not Employe	pation / Job title (See Instructions	5)	Employer (See Instructions     Not Employed	<u> </u> s)		
Date Full name of contributor out-of-state PAC (ID#:)  10/29/2024 Staropoli, John  Contributor address; City; State; Zip Code  Boston, MA 02199		•	Amount of Contribution (\$)	\$250.00			
	Principal occupation / Job title (See Instructions)  Physician/Scientist  Employer (See Instructions)  Vertex Pharmaceuticals						
	Date 10/31/2024  Full name of contributor out-of-state PAC (ID#:)  Staropoli, John  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$100.00		
	Principal occur	Boston, MA 02199 pation / Job title (See Instructions	.)	Employer (See Instructions	z) 		
	Physician/Sc		,	Vertex Pharmaceuticals	-		
	Date Full name of contributor out-of-state PAC (ID#:)  11/03/2024 Starr, Madonna K  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$15.00		
	Principal occu Not Employe	New York, NY 10022 pation / Job title (See Instructionsed	5)	Employer (See Instructions Not Employed	<u>l</u> S)		
Date Full name of contributor out-of-state PAC (ID#:)  10/28/2024 Stehlik, Chris  Contributor address; City; State; Zip Code  Berkeley, CA 94703			Amount of Contribution (\$)	\$10.00			
	Principal occu Data Analysi	pation / Job title (See Instructions S	s)	Employer (See Instructions Berkeley Unified	5)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1				
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 47/54 Rpt: 50/84	
2	FILER NAME Lee, Jennifer	· A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	11/01/2024  5 Full name of contributor out-of-state PAC (ID#:)  Stehlik, Chris  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$10.00		
_	Delicational	Berkeley, CA 94703	٦,	Frankrije (Ozakativati			
8	Data Analysi	pation / Job title (See Instructions) S	9	Employer (See Instructions Berkeley Unified	5)		
Date Full name of contributor out-of-state PAC (ID#:)  10/27/2024 Sterling, Karen  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$5.00			
	Principal occur	Cedar Creek, TX 78612 pation / Job title (See Instructions)	_	Employer (See Instructions	·)		
			Not employed	·)			
Date Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$250.00		
		Georgetown, TX 78633					
	Principal occu Not Employe	oation / Job title (See Instructions) d		Employer (See Instructions Not Employed	s)		
	Date Full name of contributor out-of-state PAC (ID#:)  11/02/2024 Stokes, John  Contributor address; City; State; Zip Code  Bellevue, WA 98005			Amount of Contribution (\$)	\$50.00		
	Principal occu Councilmem	pation / Job title (See Instructions)		Employer (See Instructions City of Bellevue	5)		
Date Full name of contributor out-of-state PAC (ID#:)  11/03/2024 Stokes, John  Contributor address; City; State; Zip Code  Bellevue, WA 98005		•	Amount of Contribution (\$)	\$25.00			
	Principal occu Councilmem	pation / Job title (See Instructions) ber		Employer (See Instructions City of Bellevue	5)		
			•				

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1				
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 48/54 Rpt: 51/84	
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 11/04/2024  5 Full name of contributor out-of-state PAC (ID#:) Stokes, John  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00		
8	Dringinal occu	Bellevue, WA 98005 pation / Job title (See Instructions)	۵	Employer (See Instructions	·/-		
0	Councilmem		9	City of Bellevue	·)		
Date Full name of contributor out-of-state PAC (ID#:)  11/03/2024 Sutton, Ann  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00			
	Delicalization	Houston, TX 77024	_	Frankrije (Ozakastiana			
	Educator	pation / Job title (See Instructions)		Employer (See Instructions Houston Montessori	5)		
Date Full name of contributor out-of-state PAC (ID#:		)	•	Amount of Contribution (\$)	\$1.06		
		Corpus Christi, TX 78418					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	s)		
	Date Full name of contributor out-of-state PAC (ID#:)  11/03/2024 Taylor, Terry  Contributor address; City; State; Zip Code  Argyle, TX 76226		•	Amount of Contribution (\$)	\$100.00		
	Principal occu Infrastructure	pation / Job title (See Instructions)		Employer (See Instructions IBM	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  11/03/2024 Tesch, David  Contributor address; City; State; Zip Code  Richmond, TX 77407			Amount of Contribution (\$)	\$25.00		
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Houston ISD	s)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instru	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 49/54 Rpt: 52/84	
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	on Filers)
4	Date 10/28/2024  Thomas, Robert  Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00		
_	Dringing age	Fremont, CA 94539	lo.	Employer (Coo Instructions			
8	Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	)		
Date Full name of contributor out-of-state PAC (ID#:)  11/01/2024 Tones, Kevin  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00			
	Dein sin al acces	Friendswood, TX 77546		Farabasa (Ossabastas dise			
Principal occupation / Job title (See Instructions)  Engineer  NASA  Employer (See Instructions)  NASA			Employer (See Instructions NASA	5)			
Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$10.00		
		Portland, OR 97214					
	Principal occu Software Co	pation / Job title (See Instructions) nsultant		Employer (See Instructions Garth's KidStuff	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  10/28/2024 Van Stone, Mark  Contributor address; City; State; Zip Code  Imperial Beach, CA 91932			Amount of Contribution (\$)	\$2,500.00		
	Principal occu Professor	pation / Job title (See Instructions)		Employer (See Instructions SWCCD	)		
	Date Full name of contributor out-of-state PAC (ID#:)  10/28/2024 Van Stone, Mark  Contributor address; City; State; Zip Code  Imperial Beach, CA 91932			Amount of Contribution (\$)	\$5.00		
	Principal occu Professor	pation / Job title (See Instructions)		Employer (See Instructions	)		
			I				

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruc	ction Guide explains how to complete th	is for	m.	1	Total pages Schedule A1: Sch: 50/54 Rpt: 53/84	
2	FILER NAME Lee, Jennifer	· A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	Date 11/05/2024  5 Full name of contributor out-of-state PAC (ID#:) Verma, Archana  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00		
_	Delicalization	Bellevue, WA 98096	- 10	Frankrije (Ozakativati			
8	Not Employe	pation / Job title (See Instructions) d	9	Employer (See Instructions Not Employed	5)		
Date Full name of contributor out-of-state PAC (ID#:)  10/29/2024 Ward, Garrett  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$25.00			
		Brooklyn, NY 11201			L		
			Employer (See Instructions Disney Streaming	S)			
Date Full name of contributor out-of-state PAC (ID#:			•	Amount of Contribution (\$)	\$4.17		
		Pflugerville, TX 78660					
	Principal occu RN	pation / Job title (See Instructions)		Employer (See Instructions Ascension	s)		
	Date Full name of contributor out-of-state PAC (ID#:)  12/26/2024 Ward, M  Contributor address; City; State; Zip Code  Pflugerville, TX 78660		•	Amount of Contribution (\$)	\$4.17		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Ascension	<u>I</u> S)		
	Date Full name of contributor out-of-state PAC (ID#:)  11/04/2024 Watson, Guy  Contributor address; City; State; Zip Code  Manhattan, NY 10022			Amount of Contribution (\$)	\$25.00		
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	S)		
			•				

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1				
	The Instruc	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 51/54 Rpt: 54/84	
2	FILER NAME Lee, Jennifer	· A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	11/03/2024 Weight, Sharon  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00		
8	Principal occur	Half Moon Bay, CA 94019 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
	Not Employe			Not Employed	,		
Date Full name of contributor out-of-state PAC (ID#:)  11/02/2024 Weisshaar, Paul  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$15.00			
	Dringinal occur	Atlanta , GA 30338	-	Employer (See Instructions			
			Not Employed	')			
	Date Full name of contributor out-of-state PAC (ID#:)  10/31/2024 Weitzman, Elizabeth  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$100.00	
		Madison, CT 06443					
	Principal occu Writer	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	)		
	Date Full name of contributor out-of-state PAC (ID#:)  11/01/2024 Wheeler, Caley  Contributor address; City; State; Zip Code  Dallas, TX 75208			Amount of Contribution (\$)	\$25.00		
	Principal occup Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u>		
Date Full name of contributor out-of-state PAC (ID#:)  11/09/2024 White, Conni  Contributor address; City; State; Zip Code  Temple, TX 76502			Amount of Contribution (\$)	\$25.00			
	Principal occup Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u>		
			<u>'</u>				

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1				
	The Instru	ction Guide explains how to con	nplete this forr	n.	1	Total pages Schedule A1: Sch: 52/54 Rpt: 55/84	
2	FILER NAME Lee, Jennife	r A.			3	Filer ID (Ethics Commission 00088259	ı Filers)
4	Date 10/31/2024			7	Amount of Contribution (\$)	\$25.00	
_	Deinainal accu	Lakewood, CA 90712	lo-	Franks ou (Coo la etroctione	<u></u>		
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions GGUSD	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  11/03/2024 Wilder, Nancy  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00		
	Lakewood, CA 90712  Principal occupation / Job title (See Instructions)  Employer (See Instructions)			·/			
	Retired GGUSD			•)			
	Date Full name of contributor out-of-state PAC (ID#:)  10/29/2024 Williams Sr, Johnnie James  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$25.00	
	Detectional	Killeen, TX 76542  ncipal occupation / Job title (See Instructions)  Employer (See Instructions)					
	School Bus	,		Employer (See Instructions Killeen ISD	•)		
	Date Full name of contributor out-of-state PAC (ID#:)  11/04/2024 Wing Jr., Feagin  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00		
	Principal occu Chemist	Lakewood, OH 44107 pation / Job title (See Instructions)		Employer (See Instructions Self Employed	<u> </u> ;)		
Date Full name of contributor out-of-state PAC (ID#:)  11/03/2024 Winslow, Dylan  Contributor address; City; State; Zip Code  Salt Lake City, UT 84102			Amount of Contribution (\$)	\$25.00			
	Principal occu Library Assis	pation / Job title (See Instructions)		Employer (See Instructions Salt Lake City Public Lib		у	
	-		I	<u>-</u>			

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruc	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 53/54 Rpt: 56/84	
2	FILER NAME Lee, Jennifer	· A.			3	Filer ID (Ethics Commission 00088259	n Filers)
4	10/28/2024 Winston, Kevin  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00		
8		Temple, TX 76504 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> S)		
Not Employed  Date Full name of contributor out-of-state PAC (ID#:)  10/31/2024 Woodhead III, Pete Herbert  Contributor address; City; State; Zip Code  Virginia Beach, VA 23453			Amount of Contribution (\$)	\$25.00			
Principal occupation / Job title (See Instructions)  Not Employed  Not Employed			Employer (See Instructions Not Employed	5)			
	Date Full name of contributor out-of-state PAC (ID#:		)	•	Amount of Contribution (\$)	\$100.00	
		Stamford, CT 06905					
	Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  12/16/2024 black, Mary  Contributor address; City; State; Zip Code  Austin, TX 78756		•	Amount of Contribution (\$)	\$2.08		
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions Not employed	<u>1</u> S)		
Date  Full name of contributor out-of-state PAC (ID#:)  black, mary  Contributor address; City; State; Zip Code  Austin, TX 78756			Amount of Contribution (\$)	\$2.08			
	Principal occup Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION		sc	HEDULE	<b>€ A1</b>	
	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Sched Sch: 54/54 Rpt: 5		
2	FILER NAME Lee, Jennife			3	Filer ID (Ethics C 00088259	commission	Filers)
4	Date 11/03/2024  5 Full name of contributor out-of-state PAC (ID#:) franklin, Carrie  6 Contributor address; City; State; Zip Code		7	Amount of Contribu	ution (\$)	\$250.00	
8	Principal occu	Bellevue, WA 98006  pation / Job title (See Instructions)	9 Employer (See Instructions	s)			
Ü	Not Employed Not Employed			3)			

	LOANS				SCHEDULE E
	The Instruction	on Guide explains how to complete this	form.	1	iges Schedule E: 1 Rpt: 58/84
2	FILER NAME Lee, Jennifer A.			1	(Ethics Commission Filers)
4	TOTAL OF UN	IITEMIZED LOANS		1	\$
5	Date of loan 11/26/2024	7 Name of lender out-of-state F	PAC (ID#:	)	9 Loan Amount (\$) \$500.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate
	No	Temple, TX 76503			11 Maturity Date
12 Principal occupation / Job title (See Instructions)  13 Employer (See Instructions)				s)	
1.4	Unemployed	latoral	Unemployed	ara danasitas	d into political account
14	Description of Col	lateral	15 Check if personal funds w	ere depositet	(See Instructions)
16	GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)
	X not applicable	18 Guarantor address; City; State;	Zip Code		
20	Principal occupation	on	21 Employer (See Instruction	s)	

#### 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: 1/26 Rpt: 59/84	Lee, Jennifer A. 00088259
4	Date	5 Payee name
	10/27/2024	ActBlue Technical Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$56.29	P.O. Box 441146
		Somerville, MA 02144
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  Donation processing fee.
		Donation processing ree.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Payee name
	10/28/2024	ActBlue Technical Services
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$121.15	P.O. Box 441146
		Somerville, MA 02144
	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  Donation processing fee.
		Donation processing ree.
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Dayso nama
	10/29/2024	Payee name ActBlue Technical Services
	Amount (\$) \$87.38	Payee address; City; State; Zip Code P.O. Box 441146
	φο1.30	F.O. Box 441140
		0 " 11 11 001 11
		Somerville, MA 02144
	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
		Donation processing fee.
1		
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
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 Salaries (Contract Labor,

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 2/26 Rpt: 60/84	Lee, Jennifer A. 00088259
4	Date	5 Payee name
	10/30/2024	ActBlue Technical Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$19.45	P.O. Box 441146
		Somerville, MA 02144
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Donation processing fee.
_		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/31/2024	ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$34.82	P.O. Box 441146
		Somerville, MA 02144
	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
		Donation processing fee.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	11/03/2024	ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.71	P.O. Box 441146
		Somerville, MA 02144
	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
		Donation processing fee.
		Donation processing rec.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>U</b>
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#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

Fees Food/Beverage Expense
Gift/Awards/Memorials Expense
Committee 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: 3/26 Rpt: 61/84	Lee, Jennifer A. 00088259
4	Date	5 Payee name
	11/04/2024	ActBlue Technical Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$23.83	P.O. Box 441146
		Somerville, MA 02144
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  Donation processing fee.
		Donation processing tee.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	11/05/2024	ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.41	P.O. Box 441146
		Somerville, MA 02144
	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.
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Donation processing fee.
	Compulate ONLY if direct	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
	11/10/2024	ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.39	P.O. Box 441146
		Somerville, MA 02144
	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  Donation processing fee.
		Dollation processing ree.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		
L		

#### 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 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: 4/26 Rpt: 62/84	Lee, Jennifer A. 00088259
4	Date	5 Payee name
	11/11/2024	ActBlue Technical Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1.98	P.O. Box 441146
		Somerville, MA 02144
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  Donation processing fee.
		Donation processing ree.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	11/14/2024	ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.99	P.O. Box 441146
	40.00	. 18. 28. 1.22.18
		Somerville, MA 02144
	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
		Donation processing fee.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/17/2024	ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.07	P.O. Box 441146
	Ψ2.01	1.0. 50% 441140
		Somerville, MA 02144
	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
		Donation processing fee.
	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 -Candidate/Officeholder/Political Committee

**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

	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: 5/26 Rpt: 63/84	Lee, Jennifer A. 00088259		
4	Date	5 Payee name		
	11/18/2024	ActBlue Technical Services		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$0.04	P.O. Box 441146		
		Somerville, MA 02144		
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		
		Donation processing fee.		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
9	expenditure to benefit C/O			
_	Data			
	Date 11/20/2024	Payee name ActBlue Technical Services		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$0.09	P.O. Box 441146		
		Somerville, MA 02144		
	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		
		Donation processing fee.		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OF			
	Date	Payee name		
	11/24/2024	ActBlue Technical Services		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$0.40	P.O. Box 441146		
		Somerville, MA 02144		
	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		
		Donation processing fee.		
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O			

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense 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		Legal Services	Salaries/\	Wages	s/Contract Labor	OTHER (enter a	category not listed above)	
		·	The Instruction Guide	explains now to co	mpie				_
1	Total pages Schedule F1:	l				[3		(Ethics Commission Filers)	
	Sch: 6/26 Rpt: 64/84	Lee, Jennif	er A.				00088259		
4	Date	5 Payee name							
	11/26/2024	ActBlue Te	chnical Services						
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode				_
	\$0.26	P.O. Box 44	11146						
		Somerville,	ΜΔ 021///						
Ļ	DUDDOOF				(a.)				_
8	PURPOSE OF	l	ee Categories listed at the to	pp of this schedule)	(a)	Description	staids of Toyon Com	unlata Cabadula T	
	EXPENDITURE	Fees					tside of Texas. Com TX, officeholder living		
						Donation proce		, . ,	
						•	J		
9	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	ıaht		Office he	əld	_
ľ	expenditure to benefit C/O		oonoidoi namo	000 000	agc		O III OO III	Sid	
-	Date	Dayoo nama							=
	12/01/2024	Payee name	phainal Continue						
			chnical Services						_
	Amount (\$)	Payee addre	•	State; Zip Co	ode				
	\$10.28	P.O. Box 44	11146						
		Somerville,	MA 02144						
	PURPOSE	(a) Category (S	ee Categories listed at the to	pp of this schedule)	(b)	Description			
	OF EXPENDITURE	Fees					tside of Texas. Com		
	EXI ENDITORE					ш	X, officeholder living	g expense	
						Donation proce	essing tee.		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ceholder name	Office sou	ught		Office he	eld	
	Date	Payee name							
	12/03/2024	ActBlue Te	chnical Services						
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode				
	\$5.93	P.O. Box 44	11146						
		Somerville,	MA 02144						
	PURPOSE	(a) Category (S	ee Categories listed at the to	pp of this schedule)	(b)	Description			_
	OF EXPENDITURE	Fees				_	tside of Texas. Com		
	LAI LINDITORE						X, officeholder living	g expense	
						Donation proce	essing tee.		
									_
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held								
L	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 (Ethics Commission Filers)			
	Sch: 7/26 Rpt: 65/84	Lee, Jennifer A. 00088259			
4	Date	5 Payee name			
	12/10/2024	ActBlue Technical Services			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$0.17	P.O. Box 441146			
l					
		Somerville, MA 02144			
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			
l		Donation processing fee.			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	1			
F	Date	Payee name			
l	12/11/2024	ActBlue Technical Services			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1.98	P.O. Box 441146			
l					
l		Somerville, MA 02144			
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
l	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.			
l		Check if Austin, TX, officeholder living expense  Donation processing fee.			
		Duffation processing fee.			
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OH				
F	Date	Payee name			
	12/15/2024	ActBlue Technical Services			
H	Amount (\$)	Payee address; City; State; Zip Code			
	\$0.99	P.O. Box 441146			
l					
		Somerville, MA 02144			
	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.			
	LXI LINDITORE	Check if Austin, TX, officeholder living expense			
		Donation processing fee.			
$\vdash$	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
Credit Card Payment

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

	Credit Card Payment	The Instruction Guide explains how to complete thi	is form.		
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 8/26 Rpt: 66/84	Lee, Jennifer A.	00088259		
4	Date	5 Payee name	·		
	12/16/2024	ActBlue Technical Services			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$0.09	P.O. Box 441146			
		Somerville, MA 02144			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	cription		
	OF EXPENDITURE	1669	Check if travel outside of Texas. Complete Schedule T.		
			Check if Austin, TX, officeholder living expense nation processing fee.		
		2011	idion processing ree.		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/O				
H	Date	Payee name			
	12/22/2024	ActBlue Technical Services			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$0.49	P.O. Box 441146			
	*****				
		Somerville, MA 02144			
	PURPOSE	(b) 0	ovintion		
	OF	, , _	Cription Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	1 003	Check if Austin, TX, officeholder living expense		
		Don	nation processing fee.		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held		
	experionality to benefit C/O	1			
	Date	Payee name			
	12/26/2024	ActBlue Technical Services			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$0.26	P.O. Box 441146			
		Somerville, MA 02144			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	cription		
	OF EXPENDITURE	1003	Check if travel outside of Texas. Complete Schedule T.		
			Check if Austin, TX, officeholder living expense nation processing fee.		
		Doll	iduon processing ice.		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/O	•	Office field		
l					

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to com	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 9/26 Rpt: 67/84	Lee, Jennifer A.		00088259
4	Date	5 Payee name		
	12/29/2024	ActBlue Technical Services		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$9.88	P.O. Box 441146		
		Companyilla MA 00144		
_		Somerville, MA 02144		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Fees	b)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	rees		Check if Austin, TX, officeholder living expense
				Donation processing fee.
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	ht	Office held
	experience to borionic Grou			
	Date	Payee name		
	11/22/2024	Action Network		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$442.50	1310 L Street NW		
		Suite 500		
		Washington, DC 20005		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Texting services.
				-
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/O	1		
	Date	Payee name		
	11/22/2024	Action Network		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$3,101.92	1310 L Street NW		
		Suite 500		
		Washington, DC 20005		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE			Check if Austin, TX, officeholder living expense
				Texting Services
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/O			Cindo Hold
_				

### 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 comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
l	Sch: 10/26 Rpt: 68/84	Lee, Jennifer A.	00088259
4	Date	5 Payee name	•
	10/29/2024	All Wrights Services LLC	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$178.40	3212 E. Adams Ave.	
l		Temple, TX 76501	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
	LAFLINDITORL		Check if Austin, TX, officeholder living expense
			Sign install.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	Complete ONLY if direct expenditure to benefit C/Ol		Office field
⊨	D-4-		
	Date 11/07/2024	Payee name	
L		Blackshear, Lakeisha	
l	Amount (\$)	Payee address; City; State; Zip Code	
	\$302.47	209 Arrowhead Drive	
		11-1-11-11-11-TV 70540	
		Harker Heights, TX 76548	
	PURPOSE OF	- ( · · · · · · · · · · · · · · · · · ·	Description
	EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Canvassing/poll greeting.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol	1	
	Date	Payee name	
	12/10/2024	Blackshear, Lakeisha	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	209 Arrowhead Drive	
l			
		Harker Heights, TX 76548	
	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  Canvassing.
			Carivassing.
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol	•	Since Held
$\vdash$			

#### 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	e this form.		
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 11/26 Rpt: 69/84	Lee, Jennifer A.	00088259		
4	Date	5 Payee name	·		
	10/31/2024	Cadence Bank			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$2.00	2910 W. Jackson St.			
		Tupelo, MS 38801			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description		
	OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		L	Paper statement fee.		
			•		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/O	1			
	Date	Payee name			
	11/25/2024	Cadence Bank			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$36.00	2910 W. Jackson St.			
		Tupelo, MS 38801			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) [	Description		
	OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		L	Crieck i Austin, 17, bliceholder living expense  Banking fee.		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/O	1			
	Date	Payee name			
	11/29/2024	Cadence Bank			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$2.00	2910 W. Jackson St.			
		Tupelo, MS 38801			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description		
	OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		L	Paper statement fee.		
			•		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/O	1			
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 complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/26 Rpt: 70/84	Lee, Jennifer A. 00088259
4	Date	5 Payee name
l	12/31/2024	Cadence Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.00	2910 W. Jackson St.
l		
l		Tupelo, MS 38801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF	Accounting/Banking  Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Service charge.
Ļ		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
┕	'	
l	Date	Payee name
L	12/31/2024	Cadence Bank
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$2.00	2910 W. Jackson St.
l		
l		Tupelo, MS 38801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
l		Paper statement fee.
l		Tapor statement rock
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
l	expenditure to benefit C/OI	
H	Date	Payee name
l	10/28/2024	Collective Campaigns
⊢	Amount (\$)	Payee address; City; State; Zip Code
l	\$5,798.00	1124 Desert Willow Lp.
l	72,12333	·
l		Austin, TX 78748
⊢	PURPOSE	
l	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.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Staff wages
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experientale 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: 13/26 Rpt: 71/84	Lee, Jennifer A. 00088259
4	Date	5 Payee name
	11/04/2024	Collective Campaigns
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,323.06	1124 Desert Willow Lp.
		Austin, TX 78748
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
		Check if Austin, TX, officeholder living expense  Staff pay.
		Stan pay.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
_	Date	Payee name
	11/13/2024	Collective Campaigns
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,550.98	1124 Desert Willow Lp.
	ψ0,000.30	1124 Besoft Willow Ep.
		Austin, TX 78748
	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
		Consultant pay.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit Great	
	Date	Payee name
	10/28/2024	Ferguson, Wesley
	Amount (\$)	Payee address; City; State; Zip Code
	\$192.65	3669 Canyon Heights Rd
		Belton, TX 76513
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Canvassing
ı		
l		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	

#### 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 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: 14/26 Rpt: 72/84	Lee, Jennifer A.	00088259	
4	Date	5 Payee name		
	11/04/2024	Fuerza Strategies, LLC.		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$2,000.00	3415 Navajo Ct.		
		Dallas, TX 75224		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description	
	OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.	
	LXI LINDITORE		Check if Austin, TX, officeholder living expense	
			Fundraising Director.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held	
	expenditure to benefit C/O		Office field	
_	Date	Davies warms		
	11/06/2024	Payee name Gardner, D'Amberlyn		
		<u> </u>		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$208.77	2102 Hunt Drive		
		Unit D		
		Killeen, TX 76543		
	PURPOSE OF		Description	
	EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
			Canvassing.	
			· ·	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held	
	expenditure to benefit C/OI	1		
	Date	Payee name		
	11/04/2024	Google, LLC.		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$61.40	1600 Amphitheatre Pkwy.		
		Mountain View, CA 94043		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description	
	OF EXPENDITURE	Digital workspace	Check if travel outside of Texas. Complete Schedule T.	
			Check if Austin, TX, officeholder living expense Email/Digital Storage/Virtual Collaboration for	
			campaign staff.	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held	
	expenditure to benefit C/O		Chief 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

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Legal Services Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.				OTHER (enter a category not listed above)						
				The Instruction C	Suide explains	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission	n Filers)
	Sch: 15/26 Rpt: 73/84		Lee, Jennife	r A.						00088259		
4	Date	5	Payee name									
	12/02/2024		Google, LLC	<b>&gt;</b> .								
6	Amount (\$)	7	Payee addres	s; City;	State	; Zip Co	de					
	\$48.61		1600 Amphi	theatre Pkwy.								
			Mountain Vi	ew, CA 94043								
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sol	hedule)	(b)	Description				
	OF			nead/Rental Ex		,		Check if travel of	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE				•			Check if Austin,	TX,	officeholder living	g expense	
								Email hosting	١.			
9	Complete ONLY if direct		Candidate/Offic	eholder name	(	Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	11/06/2024		Grogan-Gar	dner, Dorothy								
	Amount (\$)		Payee addres	s; City;	State	; Zip Co	de					
	\$208.77		2102 Hunt D	rive								
			Unit D									
			Killeen, TX 7	76543								
	PURPOSE	(a)	Category (sc	e Categories listed at	the ten of this sel	hodulo)	(b)	Description				
	OF	<u> </u> `´		ges/Contract l		nedule)	` ,	_ :	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE			9				ш	TX,	officeholder living	g expense	
								Cavassing				
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	eholder name	(	Office sou	ght			Office h	eld	
	experiditure to beriefit C/Oi	П										
	Date		Payee name									
	11/05/2024		H-E-B, L.P.	#182								
	Amount (\$)		Payee addres	s; City;	State	e; Zip Co	de					
	\$46.93		3002 S. 31s	t. St.								
			Temple, TX	76502-1802								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this scl	hedule)	(b)	Description				
	OF EXPENDITURE			age Expense				ш			plete Schedule T.	
	ZA ZIIDII GIAZ							_		officeholder living	g expense	
								Volunteer Ref	ires	siinents.		
	Complete ONLY if alice at	Ļ	Condidate /Off	oholder nems		Office	ab÷			Office !-	ald	
	Complete ONLY if direct expenditure to benefit C/OI		zariuiuale/Offic	ceholder name	(	Office sou	ynt			Office h	ziu -	

### 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: 16/26 Rpt: 74/84	Lee, Jennifer A. 00088259
4	Date	5 Payee name
	11/06/2024	Jeremey, Lee
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$70.00	5502 Redpine Drive
		Killeen, TX 76542
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  Canvassing
		Curvassing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Data	
	Date	Payee name
	11/04/2024	Killeen Daily Herald
	Amount (\$)	Payee address; City; State; Zip Code
	\$679.00	P.O. Box 1300
		Killeen, TX 76540
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Digital banner.
		Digital baliller.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	11/14/2024	Lee, Jeremey
	Amount (\$)	Payee address; City; State; Zip Code
	\$101.25	5502 Redpine Drive
L		Killeen, TX 76542
	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  Canvassing
		Curivassing
	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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/26 Rpt: 75/84	Lee, Jennifer A. 00088259
4	Date	5 Payee name
	11/07/2024	Marquez, Omar
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	526 FM 2410
		Harker Heights, TX 76548
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense
		Food for volunteers.
_		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/04/2024	NGP VAN
	Amount (\$)	Payee address; City; State; Zip Code
	\$133.25	655 15th St. NW, Ste. 650
		Washington, DC 20005
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Database subscription  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Field research tool.
		Tield research tool.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>y</b>
	Data	Davis same
	Date 12/27/2024	Payee name  NGP VAN
	Amount (\$)	Payee address; City; State; Zip Code
	\$133.25	655 15th St. NW, Ste. 650
		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  Digital services.
		Digital Services.
	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 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:		3 Filer ID (Ethics Commission Filers)
	Sch: 18/26 Rpt: 76/84	Lee, Jennifer A.	00088259
4	Date	5 Payee name	
L	11/04/2024	Optimal	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,000.00	1133 15th St. NW Ste. 800	
		Washington, DC 20005	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	
	OF EXPENDITURE	Advertising Expense	: if travel outside of Texas. Complete Schedule T. : if Austin, TX, officeholder living expense
		<b></b>	advertising.
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/29/2024	Progressive Change Campaign Committee	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.00	1629 K Street	
		Suite 300	
		Washington, DC 20006	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	tion
	OF EXPENDITURE	Advertising Expense	rif travel outside of Texas. Complete Schedule T. rif Austin, TX, officeholder living expense
			Services
			-
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/01/2024	QuickTrip Coporation	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2.00	4705 South 129th East Ave.	
		Tulsa, OK 74134	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	tion
	OF EXPENDITURE	Food/Beverage Expense	if travel outside of Texas. Complete Schedule T.
			if Austin, TX, officeholder living expense block walk event.
		lice for	olook train overti.
	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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		<u> </u>
1	Total pages Schedule F1: Sch: 19/26 Rpt: 77/84	2 FILER NAME Lee, Jennifer A.  3 Filer ID (Ethics Commission Filers) 00088259
4	Date	5 Payee name
	11/04/2024	Sam's Club No.6336
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$148.02	1414 Marland Wood Rd.
		Temple, TX 76502
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense
		Volunteer refreshments.
_	Operation ONLY if direct	One district Office health and a second of the second of t
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/30/2024	Scale to Win
	Amount (\$)	Payee address; City; State; Zip Code
	\$906.13	13742 Harper Street
		Santa Ana, CA 97203
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Text campaign/organizing
		Toxt dampaign/organizing
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/04/2024	Scale to Win
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,355.52	13742 Harper Street
		Santa Ana, CA 97203
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Text/dialer program.
		Textudialet program.
$\vdash$	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
Credit Card Payment

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

	Credit Card Payment	The Instruction Guide explains how to complete th	is form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 20/26 Rpt: 78/84	Lee, Jennifer A.	00088259
4	Date	5 Payee name	·
	11/07/2024	Scale to Win	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,432.88	13742 Harper Street	
		Santa Ana, CA 97203	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	cription
	OF EXPENDITURE	I I leid Experise	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense to Dialer for phone banking.
		7.44	o Didier for phone barraing.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
H	Date	Payee name	
	11/12/2024	Scale to Win	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$275.22	13742 Harper Street	
		·	
		Santa Ana, CA 97203	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Des	
	EXPENDITURE		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			o dialer for phone banking.
			9
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	11/01/2024	Shipley Do-Nuts	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$34.86	420 E FM 2410 Road	
		Harker Heights, TX 76548	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	scription
	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense unteer breakfast.
		Volt	uniteer breaklast.
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·	Office Hold
l			

### SCHEDULE F1

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

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: 21/26 Rpt: 79/84	Lee, Jennifer A. 00088259
4	Date	5 Payee name
	11/19/2024	Soriano, Trey
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$628.37	702 White Hawk Trail
		Harker Heights, TX 76548
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.
		Canvassing/poll greeting.
		Carry assing/poil greeting.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
_	<u> </u>	
	Date	Payee name
	11/21/2024	Squarespace, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$38.38	225 Varick St. 12th Floor
		New York, NY 10014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Web Hosting.
		พ่อม กิบรินิทินู.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/29/2024	Squarespace, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.00	225 Varick St. 12th Floor
		New York, NY 10014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Web hosting.
_	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
	Complete <u>ONLY</u> 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
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: 22/26 Rpt: 80/84	Lee, Jennifer A. 00088259
4	Date	5 Payee name
	12/23/2024	Squarespace, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$38.38	225 Varick St. 12th Floor
		New York, NY 10014
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Web hosting.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_	Data	
	Date 11/14/2024	Payee name TapTap Art Studio
	Amount (\$)	Payee address; City; State; Zip Code
	\$350.00	103 Mountain Lion Road
		H. J. H. H. TV 70540
		Harker Heights, TX 76548
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Venue Rental.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/07/2024	The Sign Man
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	unavailable
		Temple, TX 76504
	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 Poll greeting/sign holder.
		r on greenig/sign noiden.
L	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

**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)	
l	Sch: 23/26 Rpt: 81/84	Lee, Jennifer A. 00088259	
4	Date	5 Payee name	_
	11/13/2024	United States Postal Service	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
l	\$108.00	401 N. Main St.	
		Temple, TX 76501	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Postage	
	LAFLINDITORL	Check if Austin, TX, officeholder living expense	
		Stamps	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
ľ	Complete ONLY if direct expenditure to benefit C/OI		
⊨	<u> </u>		_
	Date	Payee name	
	11/14/2024	United States Postal Service	_
l	Amount (\$)	Payee address; City; State; Zip Code	
	\$43.80	401 N. Main St.	
L		Temple, TX 76501	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
	EXPENDITURE	Postage Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Stamps.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
Г	Date	Payee name	
	10/31/2024	White, Constance	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$627.67	5433 205 Loop	
		Apt 280	
		Temple, TX 76502	
T	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
l	OF EXPENDITURE	Salaries/Wages/Contract Labor	
	LXI LINDITORE	Check if Austin, TX, officeholder living expense	
		Canvassing	
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
$\vdash$			
l			

### 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: 24/26 Rpt: 82/84	Lee, Jennifer A. 00088259
4	Date	5 Payee name
	11/07/2024	White, Constance
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,266.89	5433 205 Loop
		Apt 280
		Temple, TX 76502
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Covassing
		Cavassing.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
	Date	Payee name
	10/31/2024	Worley Printing Co., Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$805.38	3217 N. IH-35
		Austin, TX 78722
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Push cards
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/05/2024	Worley Printing Co., Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$309.60	3217 N. IH-35
		Austin, TX 78722
	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  Campaign Literature.
		Sampaigh Elichatore.
	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
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 co	mpl	ete this form.		
<b>1</b> To	otal pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
S	ch: 25/26 Rpt: 83/84	Lee, Jennifer A.			00088259	
<b>4</b> Da	ate	5 Payee name		•		
12	2/05/2024	Worley Printing Co., Inc.				
<b>6</b> Ar	mount (\$)	7 Payee address; City; State; Zip Co	ode			
	\$225.16	3217 N. IH-35				
		Austin, TX 78722				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
F	OF EXPENDITURE	Printing Expense		Check if travel outside		
_				Check if Austin, TX, Literature.	officeholder living	g expense
				Literature.		
9 C	omplete ONLY if direct	Candidate/Officeholder name Office sou	ıaht		Office h	eld
	spenditure to benefit C/O		igiit		Office II	ciu
D	nto.	D				
	ate 0/28/2024	Payee name Y Strategy LLC				
			1 -			
Ar	mount (\$)	Payee address; City; State; Zip Co	oae			
	\$5,000.00	3110 Manor Road				
		Suite H				
		Austin, TX 78723				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description	do of Toyon Com	sploto Cobodulo T
E	EXPENDITURE	Advertising Expense		Check if travel outside Check if Austin, TX,		
				Digital/Streaming		
	omplete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	ıght		Office h	eld
ех	penditure to benefit C/O	4				
Da	ate	Payee name				
13	1/04/2024	Y Strategy LLC				
Ar	mount (\$)	Payee address; City; State; Zip Co	ode			
	\$1,000.00	3110 Manor Road				
		Suite H				
		Austin, TX 78723				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
_	OF	Advertising Expense	l` ´	Check if travel outside	de of Texas. Com	plete Schedule T.
	EXPENDITURE			Check if Austin, TX,	officeholder living	g expense
				Streaming ads.		
	1. 0.11	0 51 40%				
	omplete <u>ONLY</u> if direct spenditure to benefit C/O	Candidate/Officeholder name Office sou	ıght		Office h	eld

### 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	y - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp	Salaries/W	pense ages/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	1				3	Filer ID	(Ethics Commission Filers)
	Sch: 26/26 Rpt: 84/84	Lee, Jenn	ifer A.				00088259	
4	Date	5 Payee nam						
	10/28/2024	Zapier.cor	n					
6	Amount (\$)	7 Payee addr	ress; City;	State; Zip Co	de			
	\$31.97	548 Marke	et Street					
		#62411						
		San Franc	cisco, CA 94104					
8	PURPOSE	(a) Category	(See Categories listed at the top of	this schedule)	(b) Description			
	OF EXPENDITURE		g Expense				de of Texas. Com	
					Web applica		officeholder living	
					vves applied	ation	ii ii oi i ii aaloi i	System.
9	Complete ONLY if direct expenditure to benefit C/Oh	 Candidate/O H	fficeholder name	Office sou	ght		Office he	eld