FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00086783 3 COMMITTEE NAME **OFFICE USE ONLY** Blue Horizon Texas PAC Date Received **ELECTRONICALLY FILED** 01/15/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 780162 Date Hand-delivered or Date Postmarked Change of Address San Antonio, TX 78278 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Claire NAME NICKNAME LAST **SUFFIX** Barnett STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2922 Meadow Thrush STREET **ADDRESS** (Residence or Business) San Antonio, TX 78231 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 780162 MAILING **ADDRESS** San Antonio, TX 78278 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (571) 338-7335 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 10/27/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME		13 Filer ID (Ethics Commission Filers)
Blue Horizon Texas PAC		00086783
4 COMMITTEE 1. Candid (Identify by na applicable, cla	24	n State Representative
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed	
2. Measu	res A. Supported	
	date and location d nature of issue.)	
	B. Opposed	
3. Officeh Assiste (Identify by na applicable, cla	ed	
TOTALS PLEDG	UNITEMIZED POLITICAL CONTRIBUTIONS (OT GES, LOANS, OR GUARANTEES OF LOANS, OR RIBUTIONS MADE ELECTRONICALLY) ere if this report qualifies for the higher itemization thresho	\$ 0.0
	IL POLITICAL CONTRIBUTIONS ER THAN PLEDGES, LOANS, OR GUARANTEES	OF LOANS) \$ 7,625.4
EXPENDITURE 3. TOTAL TOTALS	UNITEMIZED POLITICAL EXPENDITURES	\$ 0.0
4. TOTA	L POLITICAL EXPENDITURES	\$ 14,970.0
	POLITICAL CONTRIBUTIONS MAINTAINED AS E REPORTING PERIOD	OF THE LAST DAY \$ 7,101.2
	PRINCIPAL AMOUNT OF ALL OUTSTANDING L DAY OF THE REPORTING PERIOD	OANS AS OF THE \$ 0.0
6 AFFIDAVIT		<u>'</u>
		er penalty of perjury, that the accompanying report is ncludes all information required to be reported by me n Code.
		Claire Barnett Signature of Campaign Treasurer
AFFIX NOTARY STAMP / S		Signature of Campaign Treasurer
Sworn to and subscribed before me.	by the said	, this the day
	, to certify which, witness my hand and seal of c	
Signature of officer administering	oath Printed name of officer administering	g oath Title of officer administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 3 of 27

					1 ago o o 2 2
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Blue Horizon Texas PAC				00086783	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Detrick DeBurr State Represe	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE			Ini Damatt Ct-t- Damatt	hia	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Jai Daggett State Representat	live	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Kathy Cheng State Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	(Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if	B. Opposed			

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC **ADDENDUM**

						Page 4 of 27
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Blue Horizon Texas	PAC				00086783	
14 COMMITTEE ACTIVITY (Attach lists on plain	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed	Morgan Kirkp	atrick State Board	Of Education	
paper to complete this report if necessary.)		В. Оррозси				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rachel Mello	State Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rayna Glasse	er State Board Of	Education	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	•	•				

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC **ADDENDUM**

				Page 5 01 27
		_	13 Filer ID	(Ethics Commission Filers)
С			00086783	
Candidates (Identify by name or, if applicable, classify by party.)		Sarah Smith State Representati	ive	
	B. Opposed			
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
	B. Opposed			
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
Candidates (Identify by name or, if applicable, classify by party.)		Stephanie Bassham State Repr	esentative	
	B. Opposed			
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
	B. Opposed			
Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported B. Opposed B. Opposed B. Opposed	1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed A. Supported Stephanie Bassham State Representation of the control o	1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported B. Opposed A. Supported B. Opposed A. Supported B. Opposed A. Supported B. Opposed B. Opposed A. Supported B. Opposed B. Opposed B. Opposed A. Supported Cleantify by name or, if applicable, classify by party.) B. Opposed A. Supported Stephanie Bassham State Representative Cleantify by name or, if applicable, classify by party.) B. Opposed B. Opposed B. Opposed B. Opposed C. Measures (Describe by date and location of election and nature of issue.) B. Opposed B. Opposed

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SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

					6 of 27
l		EE NAME con Texas PAC	18 Filer ID 00086783	(Ethics Commiss	sion Filers)
19 SC	HEDULI	ESUBTOTALS			
NA	ME OF	SCHEDULE		SUBTOTAL	_ AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,625.45
2.	X	\$	5,000.00		
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION)R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	14,970.06
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBU	TION	IS		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete th	his for	m.	1	Total pages Schedule A1: Sch: 1/12 Rpt: 7/27	
2	FILER NAME Blue Horizon	ı Texas PAC			3	Filer ID (Ethics Commission 00086783	n Filers)
4	Date 10/30/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$25.00
		San Antonio, TX 78248					
8	Principal occu Accountant	pation / Job title (See Instructions)	9	Employer (See Instructions Schuh Browne P.C.	5)		
	Date 11/18/2024	Full name of contributor out-of-state PAC Adcock, Rick Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$6.00
	Dringinal occu	San Antonio, TX 78248 pation / Job title (See Instructions)		Employer (See Instructions	·/-		
	Accountant	pation / Job title (See Instructions)		Schuh Browne P.C.	·)		
	Date 12/18/2024	Full name of contributor out-of-state PAC Adcock, Rick Contributor address; City; State; Zip Code	(ID#:)	•	Amount of Contribution (\$)	\$6.00
		San Antonio, TX 78248					
	Principal occu Accountant	pation / Job title (See Instructions)		Employer (See Instructions Schuh Browne P.C.	s)		
11/20/2024 Ardii Cont		Full name of contributor out-of-state PAC Ardington, Amy Contributor address; City; State; Zip Code Bellville, TX 77418	`			Amount of Contribution (\$)	\$15.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	<u>. </u>		
	Date 10/30/2024	Full name of contributor out-of-state PAC Bartos, Janet P Contributor address; City; State; Zip Code Little Rock, AR 72223-4297				Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 2/12 Rpt: 8/27	
2	FILER NAME Blue Horizon	Texas PAC			3	Filer ID (Ethics Commission 00086783	ı Filers)
4	Date 11/13/2024	5 Full name of contributorBasaldua, Homero6 Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)	7	Amount of Contribution (\$)	\$25.00
8	Principal occur	EDINBURG, TX 78541 pation / Job title (See Instructions)	la.	Employer (See Instructions	;) 		
0	Not Employe		J	Not Employed	·)		
	Date 12/13/2024	Full name of contributor Basaldua, Homero Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$)	\$25.00
		EDINBURG, TX 78541					
	Principal occur Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	s)		
	Date 11/12/2024)		Amount of Contribution (\$)	\$25.00
		Austin, TX 78701					
	Principal occu Chemical En	pation / Job title (See Instructions) gineer		Employer (See Instructions Makel Engineering Inc.	5)		
	Date Full name of contributor out-of-state PAC (ID#: 12/12/2024 Carranza, Susana		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 11/15/2024	Full name of contributor Compton, Annie Contributor address; City; Sta	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$5.00
	Principal occu Artist	pation / Job title (See Instructions)		Employer (See Instructions Self	s)		
			·				

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to com	nplete this form	n.	1	Total pages Schedule A1: Sch: 3/12 Rpt: 9/27	
2	FILER NAME Blue Horizon	ı Texas PAC			3	Filer ID (Ethics Commission 00086783	Filers)
4	Date 12/15/2024	Compton, Annie	-state PAC (ID#:		7	Amount of Contribution (\$)	\$5.00
		Austin, TX 78757					
8	Principal occu Artist	pation / Job title (See Instructions)	9	Employer (See Instructions Self	s)		
	Date 11/05/2024	Curtis, Susan Contributor address; City; State; Zip C)		Amount of Contribution (\$)	\$50.00
	Principal occu	New Braunfels, TX 78232 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Not Employe	ed		Not Employed			
	Date Full name of contributor out-of-state PAC (ID#:_ 11/18/2024 Daniels, Jerald Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.00
		Austin, TX 78758					
	Principal occu State employ	pation / Job title (See Instructions) /ee		Employer (See Instructions) Tx Dept of Licensing and Regulation			
	Date Full name of contributor out-of-state PAC (ID: 12/18/2024 Daniels, Jerald					Amount of Contribution (\$)	\$5.00
	Principal occu State employ	pation / Job title (See Instructions) /ee		Employer (See Instructions Tx Dept of Licensing an		Regulation	
	Date 12/04/2024	Dew, Gloria	-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	S)		

	MONET	ARY POLITICAL CONTRII	BUTION	S		SCHEDULI	E A1
	The Instruc	ction Guide explains how to comple	ete this for	n.	1	Total pages Schedule A1: Sch: 4/12 Rpt: 10/27	
2	FILER NAME Blue Horizon	Texas PAC			3	Filer ID (Ethics Commission 00086783	ı Filers)
4	Date 10/30/2024	 Full name of contributor out-of-state out-of-state Douglas, Susan Contributor address; City; State; Zip Code 	PAC (ID#:)	7	Amount of Contribution (\$)	\$20.00
	Dringing age	Georgetown, TX 78633	<u> </u>	Employer (Coo Instructions	<u></u>		
8	Chaplain	pation / Job title (See Instructions)	9	Employer (See Instructions Fletcher Seminary	»)		
	Date 12/10/2024	Evans, Darrel	PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	Delicational	McKinney, TX 75069		Formula con (October American	<u></u>		
	Sales	pation / Job title (See Instructions)		Employer (See Instructions DEP	5)		
	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00	
		Kyle, TX 78640					
	Principal occu Not Employe	oation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
Date Full name of contributor out-of-state PAC (ID# 11/09/2024 Fuller, Edna Contributor address; City; State; Zip Code Lakeway, TX 78734)		Amount of Contribution (\$)	\$25.00	
	Principal occu Not Employe	oation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 11/08/2024	Full name of contributor out-of-state Geswender, Eric Contributor address; City; State; Zip Code Leander, TX 78641	PAC (ID#:)		Amount of Contribution (\$)	\$1.00
	Principal occu Electrician	pation / Job title (See Instructions)		Employer (See Instructions McDonald Electric	5)		
			1				

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how t	o complete this form	m.	1	Total pages Schedule A1: Sch: 5/12 Rpt: 11/27	
2	FILER NAME Blue Horizon	ı Texas PAC			3	Filer ID (Ethics Commission 00086783	n Filers)
4	Date 12/08/2024	5 Full name of contributor Geswender, Eric 6 Contributor address; City; Stat	out-of-state PAC (ID#:e; Zip Code		7	Amount of Contribution (\$)	\$1.00
8	Principal occu	Leander, TX 78641	ام	Employer (See Instructions			
•	Electrician	pation / Job title (See Instructions)	9	McDonald Electric	•)		
	Date 11/20/2024	Full name of contributor Graf, Mary Contributor address; City; Stat	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$4.00
	Dringing age	Austin, TX 78728		Employer (Con Instructions	<u>, </u>		
	retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	·)		
	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$4.00	
		Austin, TX 78728					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	s)		
11/05/2024 Karpook, James					Amount of Contribution (\$)	\$500.00	
	Principal occu Partner	pation / Job title (See Instructions)		Employer (See Instructions) Chartis			
	Date 11/19/2024	Full name of contributor Kirkpatrick, Morgan Contributor address; City; Stat LUBBOCK, TX 79424	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu Marketing Co	pation / Job title (See Instructions)		Employer (See Instructions R2M Engineering	5)		
	g Ot			gg			

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDULI	■ A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/12 Rpt: 12/27	
2	FILER NAME Blue Horizon	n Texas PAC			3	Filer ID (Ethics Commission 00086783	ı Filers)
4	Date 11/17/2024	5 Full name of contributor Kozma, Andrew6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code	_	7	Amount of Contribution (\$)	\$10.00
8	Principal occu Adjunct Prof			Employer (See Instructions University of Houston	5)		
	Date 11/03/2024	Full name of contributor Loo, Tony Contributor address; City; Si Santa Clara, CA 95051	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occupation / Job title (See Instructions) Not Employed)	Employer (See Instructions Not Employed	ions)		
	Date 11/20/2024	Full name of contributor Martin, Rebekah Contributor address; City; Si	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$25.00
	Principal occu	Austin, TX 78748 sipal occupation / Job title (See Instructions) Employer (See Instruction					
	Business An		,	Centene	,		
	Date 12/20/2024 Martin, Rebekah Contributor address; City; State; Zip Code Austin, TX 78748		out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu Business An	pation / Job title (See Instructions alyst)	Employer (See Instructions Centene	5)		
	Date 11/01/2024	Full name of contributor Miles, Matthew Contributor address; City; Si Euless, TX 76039-1750	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions ions Administrator	()	Employer (See Instructions EOG Resources Inc.	5)		

	MONET	ARY POLITICAL CON	NTRIBUTION	S		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to c	complete this form	n.	1	Total pages Schedule A1: Sch: 7/12 Rpt: 13/27	
2	FILER NAME Blue Horizon	Texas PAC			3	Filer ID (Ethics Commission 00086783	ı Filers)
4	Date 11/14/2024	Miller, Pat 6 Contributor address; City; State; Z			7	Amount of Contribution (\$)	\$15.00
8	Principal occu	Round Rock, TX 78681 pation / Job title (See Instructions)	9	Employer (See Instructions	<u></u>		
Ŭ	Not employe			Not employed	')		
	Date 11/11/2024	Full name of contributor	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
		San Antonio, TX 78247					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions None	i)		
	Date 12/11/2024	Full name of contributor of omiller, Robert Contributor address; City; State; Z	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	D: : 1	San Antonio, TX 78247			_		
	Retired	pation / Job title (See Instructions)		Employer (See Instructions None			
		–	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
	Principal occu CPA	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/25/2024	Full name of contributor on Nikolatos, John Contributor address; City; State; Z San Antonio, TX 78228-2003	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed)		
				7			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	EDULE A1	
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 8/12 Rpt: 14/27		
2	FILER NAME Blue Horizon	ı Texas PAC			3	Filer ID (Ethics Commission 00086783	n Filers)
4	Date 10/30/2024	-		7	Amount of Contribution (\$)	\$25.00	
8	Dringinal occu	Spring Branch, TX 78070	l _o	Employer (See Instructions	·/-		
0	Not Employe	pation / Job title (See Instructions) ed	J	Not Employed	·)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/04/2024 Ryan, Michael Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00		
	Deinsinal assu	Round Rock, TX 78681		Franks var (Can kastrustis va	<u></u>		
	Principal occupation / Job title (See Instructions) Not Employed Not Employed			5)			
	Date Full name of contributor out-of-state PAC (ID#:) 12/04/2024 Ryan, Michael Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00		
		Round Rock, TX 78681					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	s)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID Saenz, Raquel Contributor address; City; State; Zip Code Georgetown, TX 78626)		Amount of Contribution (\$)	\$250.00
	Principal occu Program Dire	pation / Job title (See Instructions) ector		Employer (See Instructions Girls' LEAP	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/06/2024 Schafersman, Steven Contributor address; City; State; Zip Code Midland, TX 79707			Amount of Contribution (\$)	\$51.11		
	Principal occu consulting so	pation / Job title (See Instructions) cientist		Employer (See Instructions self	5)		

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDUL		E A1	
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/12 Rpt: 15/27	
2	FILER NAME Blue Horizon	ı Texas PAC			3	Filer ID (Ethics Commission 00086783	n Filers)
4	Date 11/29/2024			7	Amount of Contribution (\$)	\$432.34	
_	Delicalization	Victoria, TX 77905	<u> </u>	O Fundamenting			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/24/2024	Full name of contributor Stewart, Susan Contributor address; City; St)		Amount of Contribution (\$)	\$40.00
	Principal occur	Pflugerville, TX 78660) I	Employer (See Instructions	;) 		
Principal occupation / Job title (See Instructions) Not Employed Not Employed			۶)				
	Date Full name of contributor out-of-state PAC (ID#:) 12/24/2024 Stewart, Susan Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$40.00		
		Pflugerville, TX 78660					
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)		
	Date 11/10/2024	Full name of contributor Thompson, Ramona Contributor address; City; St. Frisco, TX 75036)		Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	<u>I</u> S)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/10/2024 Thompson, Ramona Contributor address; City; State; Zip Code Frisco, TX 75036		•	Amount of Contribution (\$)	\$10.00		
	Principal occu Retired	pation / Job title (See Instructions		Employer (See Instructions Retired	5)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 10/12 Rpt: 16/27		
2	FILER NAME Blue Horizon	Texas PAC			3	Filer ID (Ethics Commission 00086783	n Filers)
4	Date 10/29/2024			7	Amount of Contribution (\$)	\$25.00	
8	Principal occur	New Braunfels, TX 78130 pation / Job title (See Instructions)	lo.	Employer (See Instructions	·/		
0	Not Employe		9	Not Employed	·)		
	Date 11/25/2024	Full name of contributor out-of-state in wardlaw, and contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		CYPRESS, TX 77429	1				
	Principal occupation / Job title (See Instructions) Employer (See Instructions SHIPPING COORDINATOR HH OIL TOOLS INC.		5)				
	Date Full name of contributor out-of-state PAC (ID#:) 11/18/2024 Wayt, Wendy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00		
	Deinstead	San Antonio, TX 78216		Faralassa (Ossalastassáisas	<u></u>		
	Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	5)		
	Date 12/18/2024	Full name of contributor out-of-state if Wayt, Wendy Contributor address; City; State; Zip Code San Antonio, TX 78216				Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/26/2024 Wilson, Samuel Contributor address; City; State; Zip Code Berkeley, CA 94709			Amount of Contribution (\$)	\$15.00		
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
			I				

	MONET	ARY POLITICAL C	CONTRIBUTION	NS 		SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 11/12 Rpt: 17/27	
2	FILER NAME Blue Horizon	ı Texas PAC			3	Filer ID (Ethics Commission 00086783	Filers)
4	Date 12/26/2024	5 Full name of contributor out-of-state PAC (ID#:) Wilson, Samuel 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$15.00	
		Berkeley, CA 94709					
8	Principal occu Not Employe	pation / Job title (See Instructions ed	9	Employer (See Instructions Not Employed	s)		
	Date 10/28/2024	Full name of contributor Yancy, Max Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu	Austin, TX 78765	2)	Employer (See Instructions	e)		
	Principal occupation / Job title (See Instructions) Employer (See Instruction Plum Creek Records &			oes			
	Date 11/28/2024	Full name of contributor Yancy, Max Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
		Austin, TX 78765					
	Principal occu Owner	pation / Job title (See Instructions	(3)	Employer (See Instructions Plum Creek Records &	•	oes	
	Date 12/28/2024	Full name of contributor Yancy, Max Contributor address; City; St Austin, TX 78765	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Owner	pation / Job title (See Instructions	5)	Employer (See Instructions Plum Creek Records &	•	pes	
	Date 11/14/2024	Full name of contributor breen, mary Contributor address; City; St Austin, TX 78704	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Nurse	pation / Job title (See Instructions	(5)	Employer (See Instructions	s)		
			1				

The Instruction Guide explains now to complete this form. Sch: Sch: Sch: Page 11/08/2024 S Full name of contributor out-of-state PAC (ID#:	SCHEDULE A1
2 FILER NAME Blue Horizon Texas PAC 4 Date 11/08/2024 6 Contributor address; City; State; Zip Code Austin, TX 78748 8 Principal occupation / Job title (See Instructions) 3 Filer I 0008 7 Amou	l pages Schedule A1: : 12/12 Rpt: 18/27
11/08/2024 zhu, ling 6 Contributor address; City; State; Zip Code Austin, TX 78748 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	ID (Ethics Commission Filers) 86783
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	ount of Contribution (\$) \$25.00

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 19/27 FILER NAME 3 Filer ID (Ethics Commission Filers) Blue Horizon Texas PAC 00086783 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 12/31/2024 Barnett, Claire \$4,000.001 7 Contributor address; City; State; Zip Code San Antonio, TX 78278 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) Co-Executive Director Blue Horizon Texas 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 12/31/2024 Phillips, Stephanie \$1,000.00 i Contributor address; City; State; Zip Code San Antonio, TX 78278 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) Co-Executive Director Blue Horizon Texas Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Fees

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/8 Rpt: 20/27	Blue Horizon Texas PAC	00086783
4 Date	5 Payee name	·
10/27/2024	ActBlue	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$53.24	366 Summer Street	
Expenditure from corporate funds	Somerville, MA 02144-3132	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Processing fee
		i recessing rec
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	I ught Office held
expenditure to benefit C/OI		omee ned
Dete		
Date	Payee name	
11/03/2024	ActBlue	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$18.20	366 Summer Street	
Expenditure from		
corporate funds	Somerville, MA 02144-3132	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing fee
		1 Toccssing rec
Complete ONLY if direct	Candidate/Officeholder name Office sou	lught Office held
expenditure to benefit C/OI		ight Office field
Date	Payee name	
11/10/2024	ActBlue	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$26.57	366 Summer Street	
Expenditure from		
corporate funds	Somerville, MA 02144-3132	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Processing fee
Complete CNII V if direct	Condidate/Officeholder name	Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ught Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 2/8 Rpt: 21/27	Blue Horizon Texas PAC 00086783
4 Date	5 Payee name
11/17/2024	ActBlue
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4.37	366 Summer Street
Expenditure from corporate funds	Somerville, MA 02144-3132
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Processing fee
	1 Toolsesmig Too
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Dove name
11/24/2024	Payee name ActBlue
Amount (\$)	Payee address; City; State; Zip Code
\$23.72	366 Summer Street
Expenditure from	
corporate funds	Somerville, MA 02144-3132
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
_//	Check if Austin, TX, officeholder living expense
	Processing fee
Commission ONII V if dispost	Condidate/Office holds
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/01/2024	ActBlue
Amount (\$)	Payee address; City; State; Zip Code
\$5.94	366 Summer Street
Expenditure from	
corporate funds	Somerville, MA 02144-3132
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.
D. LADITORE	Check if Austin, TX, officeholder living expense
	Processing fee
Operation Children	Open districts (Office health are now as a constant of the con
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to comp	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/8 Rpt: 22/27	Blue Horizon Texas PAC	00086783
4 Date	5 Payee name	·
12/08/2024	ActBlue	
6 Amount (\$)	7 Payee address; City; State; Zip Code	;
\$0.64	366 Summer Street	
Expenditure from		
corporate funds	Somerville, MA 02144-3132	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Processing fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	office held
expenditure to benefit C/Ol		t Office field
Date	D	
12/15/2024	Payee name ActBlue	
Amount (\$)	Payee address; City; State; Zip Code	;
\$2.98	366 Summer Street	
Expenditure from		
corporate funds	Somerville, MA 02144-3132	
PURPOSE OF	2 (Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Processing fee
Complete ONLY if direct	Candidate/Officeholder name Office sough	ot Office held
expenditure to benefit C/O	4	
Date	Payee name	
12/22/2024	ActBlue	
Amount (\$)	Payee address; City; State; Zip Code	
\$1.79	366 Summer Street	
Expenditure from corporate funds	Somerville, MA 02144-3132	
PURPOSE	(4)	D) Description
OF	(a) Category (See Categories listed at the top of this schedule)	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	1 555	Check if Austin, TX, officeholder living expense
		Processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	office held
experiorare to benefit C/O	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/8 Rpt: 23/27	Blue Horizon Texas PAC	00086783
4 Date	5 Payee name	•
12/29/2024	ActBlue	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$2.58	366 Summer Street	
Expenditure from corporate funds	Somerville, MA 02144-3132	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF	(a) Category (See Categories listed at the top of this schedule) Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Processing fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
experiulture to benefit C/Oi	1	
Date	Payee name	
11/27/2024	Campaignly Group	
Amount (\$)	Payee address; City; State; Zip Code	
\$750.00	3134 Abell Avenue	
Expenditure from corporate funds	Baltimore, MD 21218	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Solicitation/Fundraising Expense	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Email marketing
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	9	Office field
Date	Payee name	
11/05/2024	Gregory, Gabrien	
Amount (\$)	Payee address; City; State; Zip Code	
\$250.00	PO BOX 700293	
Expenditure from		
corporate funds	San Antonio, TX 78270	
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 GOTV support
		ост опрот
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI		Office Held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/8 Rpt: 24/27	Blue Horizon Texas PAC 00086783
4 Date	5 Payee name
11/13/2024	Jaimes, Abel
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,750.00	522 Dooley Rd
— Foresedit ve from	
Expenditure from corporate funds	San Antonio, TX 78624
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 GOTV support
	GOT v Support
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date	Payee name
10/28/2024	Lyles, Tonya
Amount (\$)	Payee address; City; State; Zip Code
\$1,050.00	7072 Tierra Roja
Expenditure from	
corporate funds	El Paso, TX 79912
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Salaries
Commission ONII V if disposi	Condidate/Office helds name Office accepts
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/15/2024	Phillips, Stephanie
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	PO Box 2857
Expenditure from	
corporate funds	Wimberley, TX 78676
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Solicitation/Fundraising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Reimbursement for fundraiser food purchase
Complete CALL V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct 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: 6/8 Rpt: 25/27	Blue Horizon Texas PAC		00086783	
4 Date	5 Payee name			_
11/13/2024	Phillips, Stephanie			
6 Amount (\$)	7 Payee address; City; State; Zip (Code		_
\$500.00	PO Box 2857			
Expenditure from corporate funds	Wimberley, TX 78676			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) D	escription	_
OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.	
EXPENDITORE			Check if Austin, TX, officeholder living expense	
		5	alaries	
O Commission ONLL V if disease	Condidate/Officeholder reves		Office hold	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ougni	Office held	
				_
Date	Payee name			
10/28/2024	Phillips, Stephanie			
Amount (\$)	Payee address; City; State; Zip (Code		
\$2,000.00	PO Box 2857			
Expenditure from				
corporate funds	Wimberley, TX 78676			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) D	escription	
OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
			Calaries	
Complete ONLY if direct	Candidate/Officeholder name Office so	<u> </u>	Office held	_
expenditure to benefit C/O		J		
Date	Payee name			_
10/28/2024	Scale to Win			
Amount (\$)	Payee address; City; State; Zip (Code		
\$1,163.70	13742 Harper St	Couc		
Ψ1,100.10	101-42 (14) (16)			
Expenditure from corporate funds	Santa Ana, CA 92703			
<u>'</u>		(h) p		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) GOTV texting		escription Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	GOT V texting		Check if Austin, TX, officeholder living expense	
		G	GOTV texting	
Complete ONLY if direct	Candidate/Officeholder name Office so	ought	Office held	
expenditure to benefit C/OI	-			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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: 7/8 Rpt: 26/27	Blue Horizon Texas PAC 00086783
4 Date	5 Payee name
10/30/2024	Scale to Win
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$709.15	13742 Harper St
Expenditure from corporate funds	Santa Ana, CA 92703
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	GOTV texting Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense GOTV texting
	GOTV texting
Complete ONLY if direct	Candidate/Officeholder name Office acusht
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/04/2024	Scale to Win
Amount (\$)	Payee address; City; State; Zip Code
\$2,240.46	13742 Harper St
Expenditure from corporate funds	Santa Ana, CA 92703
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	GOTV texting Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	GOTV texting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ever	
Date	Payee name
11/04/2024	Scale to Win
Amount (\$)	Payee address; City; State; Zip Code
\$2,609.13	13742 Harper St
Expenditure from corporate funds	Santa Ana, CA 92703
PURPOSE	1
OF	(a) Category (See Categories listed at the top of this schedule) GOTV texting (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	GOTV texting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

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	Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District It 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: 8/8 Rpt: 27/27	Blue Horizon Texas PAC 00086783
4 Date	5 Payee name
11/07/2024	Scale to Win
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,557.59	13742 Harper St
Expenditure from corporate funds	Santa Ana, CA 92703
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	GOTV texting Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense GOTV texting
	GOT V texting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H