



# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Texas Majority PAC	<b>13 Filer ID</b> (Ethics Commission Filers) 00087189
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 167,171.36
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 648,187.83
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 618,255.44
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**16 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Jason Lee  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - GPAC

<b>17 COMMITTEE NAME</b> Texas Majority PAC		<b>18 Filer ID</b> (Ethics Commission Filers) 00087189
<b>19 SCHEDULE SUBTOTALS</b>		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 119,324.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input checked="" type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$ 47,847.36
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 648,187.83
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 14,975.00

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/190 Rpt: 4/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Abecassis, Juliette <hr/> <b>6</b> Contributor address; City; State; Zip Code  Pembroke Pines, FL 33029-4001	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Abizaid, Christy <hr/> Contributor address; City; State; Zip Code  McLean, VA 22101-2122	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ablon, Baron <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-4415	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Soil building systems
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Abramowitz, David <hr/> Contributor address; City; State; Zip Code  Sherman Oaks, CA 91403-4117	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Abrams, Philip <hr/> Contributor address; City; State; Zip Code  San Carlos, CA 94070-4737	Amount of Contribution (\$)  \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/190 Rpt: 5/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Abrams, Philip	<b>7</b> Amount of Contribution (\$)  \$1.50
<b>6</b> Contributor address; City; State; Zip Code  San Carlos, CA 94070-4737		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ackley, Jane	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Gahanna, OH 43230-1906		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfieri, Paul	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  San Antonio, TX 78230-4438		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allen, John	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Dallas, TX 75248-5249		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allen, John	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Dallas, TX 75248-5249		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/190 Rpt: 6/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allred, Jean	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77070-2539		
<b>8</b> Principal occupation / Job title (See Instructions) Business Owner		<b>9</b> Employer (See Instructions) Allred Creates
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Ray	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Arlington, VA 22207-1335		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Angle, George	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Grand Prairie, TX 75051-1580		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Apton, Linda	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Los Lunas, NM 87031-6135		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arens, Katherine	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Austin, TX 78751-3331		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/190 Rpt: 7/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/29/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Armstrong, Kathleen	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Carmel, CA 93923-8820		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Armstrong, Nancy	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code  Wheaton, IL 60189-7632		
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Self Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Atkins, James	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Dallas, TX 75252-6836		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ayee, Norma	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code  Lake Worth, FL 33460-2705		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ayee, Norma	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Lake Worth, FL 33460-2705		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/190 Rpt: 8/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ayee, Norma <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lake Worth, FL 33460-2705	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bacon, Robert <hr/> Contributor address; City; State; Zip Code  Castle Pines, CO 80108-9528	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bahr, Joanne <hr/> Contributor address; City; State; Zip Code  Chadds Ford, PA 19317-9238	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bainton, Cedric <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94116-1443	Amount of Contribution (\$)  \$1.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baker, Susan <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77552	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/190 Rpt: 9/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baker, Wilber <hr/> <b>6</b> Contributor address; City; State; Zip Code  Spring City, PA 19475-2710	<b>7</b> Amount of Contribution (\$)  \$17.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baker, Wilber <hr/> Contributor address; City; State; Zip Code  Spring City, PA 19475-2710	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baldacci, Michelle <hr/> Contributor address; City; State; Zip Code  Vienna, VA 22181-3047	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Columbus Rose Ltd		Employer (See Instructions) Self Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ballesteros, Maximino <hr/> Contributor address; City; State; Zip Code  San Diego, CA 92114-3020	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baptist, Jeremy <hr/> Contributor address; City; State; Zip Code  Overland Park, KS 66207-2021	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/190 Rpt: 10/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baptist, Jeremy	<b>7</b> Amount of Contribution (\$) \$1.00
<b>6</b> Contributor address; City; State; Zip Code  Overland Park, KS 66207-2021		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber, David	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  North Chili, NY 14514-1403		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Marion	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Maplewood, NJ 07040-2617		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Marion	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Maplewood, NJ 07040-2617		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Marion	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code  Maplewood, NJ 07040-2617		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/190 Rpt: 11/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barr, Linda <hr/> <b>6</b> Contributor address; City; State; Zip Code  Manchaca, TX 78652-6818	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Librarian		<b>9</b> Employer (See Instructions) Austin Community College
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barr, Linda <hr/> Contributor address; City; State; Zip Code  Manchaca, TX 78652-6818	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Austin Community College
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barrera, David <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-4233	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barron, Nicholas <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78232-4192	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barter, Mary <hr/> Contributor address; City; State; Zip Code  Santa Barbara, CA 93105-1961	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/190 Rpt: 12/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/24/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barth, Ilene <hr/> <b>6</b> Contributor address; City; State; Zip Code  Telluride, CO 81435	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barth, Ilene <hr/> Contributor address; City; State; Zip Code  Telluride, CO 81435	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barth, Ilene <hr/> Contributor address; City; State; Zip Code  Telluride, CO 81435	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beck, Joseph <hr/> Contributor address; City; State; Zip Code  Lafayette, CA 94549-3133	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bedrosian, Art <hr/> Contributor address; City; State; Zip Code  Austin, TX 78735-6120	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/190 Rpt: 13/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beierle, Charles	<b>7</b> Amount of Contribution (\$)  \$1.50
<b>6</b> Contributor address; City; State; Zip Code  Kingsland, TX 78639-3954		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belden, Tom	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Casa Grande, AZ 85122-7954		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Will	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Arlington, TX 76013-8302		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Lockheed Martin
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellour, Helene	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Oak Park, IL 60302-1554		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beltran, Mary	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78702-1437		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas at Austin

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/190 Rpt: 14/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bender, Gloria	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Arlington, TX 76012-4245		
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions) TransSolutions
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bender, Gloria	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Arlington, TX 76012-4245		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) TransSolutions
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benz, Susan	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Austin, TX 78702-4306		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benz, Susan	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Austin, TX 78702-4306		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Berg, Bruce	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Tucson, AZ 85743-5238		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/190 Rpt: 15/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bergman, Eldo <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77035-3416	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bergman, Eldo <hr/> Contributor address; City; State; Zip Code  Houston, TX 77035-3416	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Berman, Lawrence <hr/> Contributor address; City; State; Zip Code  Washington, DC 20036	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bernstein, Patricia <hr/> Contributor address; City; State; Zip Code  Bellaire, TX 77401-5733	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Public Relations		Employer (See Instructions) Bernstein & Associates
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beroukhim, Katie <hr/> Contributor address; City; State; Zip Code  Cardiff, CA 92007-1146	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) Feel Good Yoga & Wellness

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/190 Rpt: 16/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Berry, Suzanne <hr/> <b>6</b> Contributor address; City; State; Zip Code  Belton, TX 76513-2644	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Not Employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Berry, Suzanne <hr/> Contributor address; City; State; Zip Code  Belton, TX 76513-2644	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beyda, Mary <hr/> Contributor address; City; State; Zip Code  Washington, DC 20037-1613	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beyda, Mary <hr/> Contributor address; City; State; Zip Code  Washington, DC 20037-1613	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bieler, Steve <hr/> Contributor address; City; State; Zip Code  Henrico, VA 23229-5901	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/190 Rpt: 17/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Black, Sylvia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Portland, OR 97221-1278	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bland, Rollie <hr/> Contributor address; City; State; Zip Code  Yonkers, NY 10710-3830	Amount of Contribution (\$)  \$9.00
Principal occupation / Job title (See Instructions) Flight Attendant		Employer (See Instructions) United Airlines
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blobner, William <hr/> Contributor address; City; State; Zip Code  Waunakee, WI 53597-9564	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bobs, Deborah <hr/> Contributor address; City; State; Zip Code  Houston, TX 77082	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Schlumberger
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bodovsky, Greg <hr/> Contributor address; City; State; Zip Code  Hillsboro, TX 76645-2910	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) IT Professional		Employer (See Instructions) Tarleton State University

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/190 Rpt: 18/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/24/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bodovsky, Greg	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Hillsboro, TX 76645-2910		
<b>8</b> Principal occupation / Job title (See Instructions) IT Professional		<b>9</b> Employer (See Instructions) Tarleton State University
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boghs, Maribel	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  San Antonio, TX 78240-3984		
Principal occupation / Job title (See Instructions) Physical Therapy		Employer (See Instructions) Cantex
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bonner, Tracey	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Arlington, TX 76014-1516		
Principal occupation / Job title (See Instructions) Coder		Employer (See Instructions) Acclaim
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bonner, Vallery	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  San Rafael, CA 94901-5034		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boone, Garrett	Amount of Contribution (\$)  \$20,000.00
Contributor address; City; State; Zip Code  Addison, TX 75001		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/190 Rpt: 19/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boone, Garrett <hr/> <b>6</b> Contributor address; City; State; Zip Code  Addison, TX 75001	<b>7</b> Amount of Contribution (\$)  \$50,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Borg Olds, Gloria <hr/> Contributor address; City; State; Zip Code  Portland, OR 97205-2477	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Borth, Terry <hr/> Contributor address; City; State; Zip Code  Bellingham, WA 98225-2951	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bostic, Jacqueline <hr/> Contributor address; City; State; Zip Code  Houston, TX 77021-1617	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Botts, Thomas <hr/> Contributor address; City; State; Zip Code  Virginia Beach, VA 23464-6736	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/190 Rpt: 20/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bouffard, Maurice <hr/> <b>6</b> Contributor address; City; State; Zip Code  Saint Johnsbury, VT 05819-1448	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bouffard, Maurice <hr/> Contributor address; City; State; Zip Code  Saint Johnsbury, VT 05819-1448	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bowe, George <hr/> Contributor address; City; State; Zip Code  Mercedes, TX 78570-0091	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boyd, Brady <hr/> Contributor address; City; State; Zip Code  Carlsbad, CA 92010-3928	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boyd, Gloria <hr/> Contributor address; City; State; Zip Code  Atascadero, CA 93422-8857	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/190 Rpt: 21/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boyd, Gloria	<b>7</b> Amount of Contribution (\$) \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Atascadero, CA 93422-8857		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boykin, Frederick	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Plano, TX 75093-8829		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bresenhan, Karey	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code  La Grange, TX 78945-4348		
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Quilts II
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brobst, John	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code  Beaufort, NC 28516-2424		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Annette	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Cedar Hill, TX 75104-2929		
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) City of Dallas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/190 Rpt: 22/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Joseph	<b>7</b> Amount of Contribution (\$) \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Schertz, TX 78108-2109		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Joseph	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Schertz, TX 78108-2109		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Sandy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Wayne, NE 68787-7114		
Principal occupation / Job title (See Instructions) Marketing Director		Employer (See Instructions) State Nebraska Bank & Trust
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brusniak, Rosario	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Plano, TX 75075-1995		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bryan, Herb	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Madison, AL 35758-6228		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/190 Rpt: 23/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Buell, Roberta	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94109-9103		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Buerger, Paul	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code  San Angelo, TX 76904-6114		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Buerger, Paul	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code  San Angelo, TX 76904-6114		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Buerger, Paul	Amount of Contribution (\$) \$13.00
Contributor address; City; State; Zip Code  San Angelo, TX 76904-6114		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Buerger, Paul	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  San Angelo, TX 76904-6114		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/190 Rpt: 24/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Buerger, Paul <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Angelo, TX 76904-6114	<b>7</b> Amount of Contribution (\$)  \$7.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bush, Leslie <hr/> Contributor address; City; State; Zip Code  Cherryfield, ME 04622-0065	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cacciato, Carolyn <hr/> Contributor address; City; State; Zip Code  Atlanta, GA 30308-2256	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cadena, Gilbert <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78254-5655	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cagle, Judy <hr/> Contributor address; City; State; Zip Code  Woodville, TX 75979-0368	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/190 Rpt: 25/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Canales, Liz <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78745	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Canales, Liz <hr/> Contributor address; City; State; Zip Code  Austin, TX 78745	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carlock, David <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027-4702	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Machete Group
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carmichael, Walta <hr/> Contributor address; City; State; Zip Code  The Woodlands, TX 77375-1073	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carpenter, Kevin <hr/> Contributor address; City; State; Zip Code  Fort Wayne, IN 46807-2848	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Field Service Engineer		Employer (See Instructions) Testex

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/190 Rpt: 26/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carpenter, William <hr/> <b>6</b> Contributor address; City; State; Zip Code  La Jolla, CA 92037-7651	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) La Mesa Spring Valley Schools
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carrillo, Valerie <hr/> Contributor address; City; State; Zip Code  Houston, TX 77059-5900	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carter, Melissa <hr/> Contributor address; City; State; Zip Code  Hartsdale, NY 10530-1923	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carter, Melissa <hr/> Contributor address; City; State; Zip Code  Hartsdale, NY 10530-1923	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Casteel, Jessica <hr/> Contributor address; City; State; Zip Code  Houston, TX 77035-5043	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) San Jacinto Community College

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/190 Rpt: 27/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Castro, Art	<b>7</b> Amount of Contribution (\$) \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Magnolia, TX 77355-1995		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chabak-Clagett, Pamela	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Lakeway, TX 78734-3830		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chang, Carol	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Fairview, TX 75069-4160		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chase, Barbara	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77062-6105		
Principal occupation / Job title (See Instructions) Agent Merchant Services		Employer (See Instructions) Self Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chase, Barbara	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77062-6105		
Principal occupation / Job title (See Instructions) Agent Merchant Services		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/190 Rpt: 28/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chatham, Cynthia	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77088-3612		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cheek, Geoffrey	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Mount Pleasant, SC 29464-4280		
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) MUSC
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chino, Vera	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77055-6719		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chino, Vera	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Houston, TX 77055-6719		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chitjian, Glenn	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Fullerton, CA 92835-1809		
Principal occupation / Job title (See Instructions) Computer Tech		Employer (See Instructions) Affordable POS

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/190 Rpt: 29/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/24/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chronis, Penelope <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94122-1911	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Churchill, Jean <hr/> Contributor address; City; State; Zip Code  Kingston, NY 12401-7743	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ciuffo, Alice <hr/> Contributor address; City; State; Zip Code  Whiting, NJ 08759-1362	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Maureen <hr/> Contributor address; City; State; Zip Code  Tucson, AZ 85712-1137	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clifford, Cynthia <hr/> Contributor address; City; State; Zip Code  Orange City, FL 32763-3502	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/190 Rpt: 30/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clifford, Cynthia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Orange City, FL 32763-3502	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clifford, Cynthia <hr/> Contributor address; City; State; Zip Code  Orange City, FL 32763-3502	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clifford, Cynthia <hr/> Contributor address; City; State; Zip Code  Orange City, FL 32763-3502	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Closs, Thomas <hr/> Contributor address; City; State; Zip Code  Parker, CO 80134-9573	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cohen, Miye <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-6709	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/190 Rpt: 31/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cole, Brenda <hr/> <b>6</b> Contributor address; City; State; Zip Code  Garland, TX 75044-2965	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cole, Kimbley <hr/> Contributor address; City; State; Zip Code  Missouri City, TX 77459-6536	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) HISD
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cole, Tommy <hr/> Contributor address; City; State; Zip Code  Fredericksburg, TX 78624	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cole, Tommy <hr/> Contributor address; City; State; Zip Code  Fredericksburg, TX 78624	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Colin, Pedro <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79904-3502	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/190 Rpt: 32/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Colmenero, Janet <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78741-4754	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Tax Examiner		<b>9</b> Employer (See Instructions) IRS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Common, Marlene <hr/> Contributor address; City; State; Zip Code  Redwood City, CA 94062-3012	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Compere, Nancy <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76116-0993	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Conrad, Greg <hr/> Contributor address; City; State; Zip Code  Petaluma, CA 94954-1567	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) ETS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Conrad, James <hr/> Contributor address; City; State; Zip Code  Alexandria, VA 22301-2605	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/190 Rpt: 33/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Conway, Teresa <hr/> <b>6</b> Contributor address; City; State; Zip Code  Franklin, TN 37067-6469	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Coon, Stacy <hr/> Contributor address; City; State; Zip Code  Kyle, TX 78640-2132	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cooper, William <hr/> Contributor address; City; State; Zip Code  Waco, TX 76708-3743	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Copeland, Harold <hr/> Contributor address; City; State; Zip Code  Houston, TX 77263-1145	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Copeland, Harold <hr/> Contributor address; City; State; Zip Code  Houston, TX 77263-1145	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/190 Rpt: 34/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Copeland-Parker, Anthony	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Roswell, GA 30076-1378		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Coppage, Gail	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Alexandria, VA 22304-8688		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cornstubble, Dewey	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Euless, TX 76039		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cossutta, Louis	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Chilmark, MA 02535-2108		
Principal occupation / Job title (See Instructions) Carpenter		Employer (See Instructions) MV Construction Co
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cossutta, Louis	Amount of Contribution (\$)  \$3.00
Contributor address; City; State; Zip Code  Chilmark, MA 02535-2108		
Principal occupation / Job title (See Instructions) Carpenter		Employer (See Instructions) MV Construction Co

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/190 Rpt: 35/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Counterman, Carolyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78412-3504	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crowe, John <hr/> Contributor address; City; State; Zip Code  Davis, CA 95618-6070	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crowe, John <hr/> Contributor address; City; State; Zip Code  Davis, CA 95618-6070	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crowe, John <hr/> Contributor address; City; State; Zip Code  Davis, CA 95618-6070	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crowe, John <hr/> Contributor address; City; State; Zip Code  Davis, CA 95618-6070	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/190 Rpt: 36/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crowe, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Davis, CA 95618-6070	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crowe, John <hr/> Contributor address; City; State; Zip Code  Davis, CA 95618-6070	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crownover, Dixie <hr/> Contributor address; City; State; Zip Code  Blairsville, GA 30512-1376	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code  Aurora, CO 80017-3384	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cuellar, Deborah <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77479-5945	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/190 Rpt: 37/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cullen, Peter <hr/> <b>6</b> Contributor address; City; State; Zip Code  Los Angeles, CA 90025-1779	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cumbie, Stephen <hr/> Contributor address; City; State; Zip Code  Vienna, VA 22182-2641	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) NVCommercial
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Curd, Yolanda <hr/> Contributor address; City; State; Zip Code  Grand Prairie, TX 75054-0120	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cuttler, Lilyan <hr/> Contributor address; City; State; Zip Code  Santa Barbara, CA 93103-1718	Amount of Contribution (\$)  \$9.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dailey, Ollie <hr/> Contributor address; City; State; Zip Code  Grand Prairie, TX 75052-2555	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/190 Rpt: 38/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Darcy, Stephanie	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Fairfax, CA 94930-1347		
<b>8</b> Principal occupation / Job title (See Instructions) Administrator		<b>9</b> Employer (See Instructions) University of San Francisco
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davis, Helen	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Richmond, TX 77469-5126		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davis, Patricia	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Palo Alto, CA 94301-3824		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) De Grassi, Alex	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Redwood Valley, CA 95470-0772		
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dean, Pamela	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Rosharon, TX 77583-2647		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/190 Rpt: 39/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dejean, Marvin <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78258-4899	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Derrig, James <hr/> Contributor address; City; State; Zip Code  Glendale, AZ 85308-8300	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Desouza, Darrell <hr/> Contributor address; City; State; Zip Code  Suisun City, CA 94585-3215	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Recreational Aid		Employer (See Instructions) Naf Financial Management
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Deutscher, David <hr/> Contributor address; City; State; Zip Code  Lafayette, CA 94549-2605	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diamondstone, Kenneth <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11217-2201	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/190 Rpt: 40/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dickman, Barbara <hr/> <b>6</b> Contributor address; City; State; Zip Code  Saint Marys, GA 31558-4100	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dickson, Cassandra <hr/> Contributor address; City; State; Zip Code  Portland, OR 97229-6831	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self Employed
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dickson, Cassandra <hr/> Contributor address; City; State; Zip Code  Portland, OR 97229-6831	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dickson, Cassandra <hr/> Contributor address; City; State; Zip Code  Portland, OR 97229-6831	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dickson, Susan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098-1710	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/190 Rpt: 41/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diot, Deborah <hr/> <b>6</b> Contributor address; City; State; Zip Code  Flower Mound, TX 75022-8441	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Sales		<b>9</b> Employer (See Instructions) Centillion
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diot, Deborah <hr/> Contributor address; City; State; Zip Code  Flower Mound, TX 75022-8441	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Centillion
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dodd, Susan <hr/> Contributor address; City; State; Zip Code  Cayucos, CA 93430-1154	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dolinger, Ysraelya <hr/> Contributor address; City; State; Zip Code  Felton, CA 95018-9419	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Sutter
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doozan, Louise <hr/> Contributor address; City; State; Zip Code  Bakersfield, CA 93309-9315	Amount of Contribution (\$)  \$1.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/190 Rpt: 42/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/24/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doozan, Louise <hr/> <b>6</b> Contributor address; City; State; Zip Code  Bakersfield, CA 93309-9315	<b>7</b> Amount of Contribution (\$)  \$1.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doran, Jim <hr/> Contributor address; City; State; Zip Code  Islamorada, FL 33036-3311	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dowling, Tom <hr/> Contributor address; City; State; Zip Code  Boyce, VA 22620-3229	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dowling, Tom <hr/> Contributor address; City; State; Zip Code  Boyce, VA 22620-3229	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Drake, Kim <hr/> Contributor address; City; State; Zip Code  Minneapolis, MN 55414-2131	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/190 Rpt: 43/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Drezner, Esther <hr/> <b>6</b> Contributor address; City; State; Zip Code  Port St Lucie, FL 34986-2805	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duffy, D. <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94107-4141	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Management Practices Group
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duke, Nancy <hr/> Contributor address; City; State; Zip Code  Elgin, TX 78621-5592	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duncan, Karen <hr/> Contributor address; City; State; Zip Code  Richmond, TX 77406-1230	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Licensed Professional Counselor		Employer (See Instructions) Greater Houston Counseling Services
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Durbin, Doreena <hr/> Contributor address; City; State; Zip Code  Denison, TX 75020-7968	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/190 Rpt: 44/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dutton, Phil <hr/> <b>6</b> Contributor address; City; State; Zip Code  Alameda, CA 94502-6856	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Project Manager		<b>9</b> Employer (See Instructions) Garrad Hassan America
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyar, Ruth <hr/> Contributor address; City; State; Zip Code  Boerne, TX 78006-0329	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Retired
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edgren, John <hr/> Contributor address; City; State; Zip Code  San Ramon, CA 94583-3109	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) Precision Auto Repair
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Effort, Edmund <hr/> Contributor address; City; State; Zip Code  Pittsburgh, PA 15222-1102	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Self Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehlert, Katherine <hr/> Contributor address; City; State; Zip Code  Mount Prospect, IL 60056-3036	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) Lutheran Church of the Cross

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/190 Rpt: 45/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eisenman, Eric	<b>7</b> Amount of Contribution (\$)  \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Lafayette, CA 94549-3216	
<b>8</b> Principal occupation / Job title (See Instructions) Director		<b>9</b> Employer (See Instructions) Pacific Gas and Electric Company
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elkin, Karen	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Alexandria, VA 22306-1342	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, A.	Amount of Contribution (\$)  \$50.00
	Contributor address; City; State; Zip Code  Santa Cruz, CA 95060-3660	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elliott, R.	Amount of Contribution (\$)  \$50.00
	Contributor address; City; State; Zip Code  Dallas, TX 75220-1611	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellman, Ira	Amount of Contribution (\$)  \$1.00
	Contributor address; City; State; Zip Code  Hermosa Beach, CA 90254-4648	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 43/190 Rpt: 46/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Emerson, Elissa	<b>7</b> Amount of Contribution (\$) \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Deland, FL 32724-3688		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Emerson, Elissa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Deland, FL 32724-3688		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Endelman, Sharon	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Houston, TX 77096-4423		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Endelman, Sharon	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Houston, TX 77096-4423		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Englert, Cynthia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Houston, TX 77019-3543		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 44/190 Rpt: 47/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Englert, Cynthia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77019-3543	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Erickson, Amalia <hr/> Contributor address; City; State; Zip Code  Redondo Beach, CA 90278-4809	Amount of Contribution (\$)  \$1.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Estabrook, Helen <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019-3540	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Estabrook, Helen <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019-3540	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Etesse, Gerald <hr/> Contributor address; City; State; Zip Code  Cedar, MN 55011-9578	Amount of Contribution (\$)  \$1.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 45/190 Rpt: 48/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eyre, Dana	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>6</b> Contributor address; City; State; Zip Code  Oceanside, CA 92056-4874		
<b>8</b> Principal occupation / Job title (See Instructions) Sociologist		<b>9</b> Employer (See Instructions) Eyre & Associates
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fales, William	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Ames, IA 50014-8201		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fales, William	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Ames, IA 50014-8201		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fales, William	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Ames, IA 50014-8201		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fales, William	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Ames, IA 50014-8201		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 46/190 Rpt: 49/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/29/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Falteisek, Leslie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Johnson City, TX 78636-5434	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Farris, Bette <hr/> Contributor address; City; State; Zip Code  Dunlap, IL 61525-8604	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ferraro, Marianne <hr/> Contributor address; City; State; Zip Code  Park City, UT 84098-5585	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ferraro, Marianne <hr/> Contributor address; City; State; Zip Code  Park City, UT 84098-5585	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Firkus-Hicks, Julie <hr/> Contributor address; City; State; Zip Code  Reno, NV 89506-7017	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 47/190 Rpt: 50/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fisher, Leslie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Hurst, TX 76054-2305	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) P3 Health Partners
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fitting, Wendy <hr/> Contributor address; City; State; Zip Code  Gloucester, MA 01930-4143	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fitting, Wendy <hr/> Contributor address; City; State; Zip Code  Gloucester, MA 01930-4143	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fitts, Robin <hr/> Contributor address; City; State; Zip Code  Gainesville, TX 76241-1245	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Muenster ISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fitzgerald, Susan <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94131-2918	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 48/190 Rpt: 51/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fleming, James <hr/> <b>6</b> Contributor address; City; State; Zip Code  Sonoma, CA 95476-5326	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fleming, Janis <hr/> Contributor address; City; State; Zip Code  Tiburon, CA 94920-2563	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flores, Silvia <hr/> Contributor address; City; State; Zip Code  Chula Vista, CA 91910-6541	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Assistant Claims Managwr		Employer (See Instructions) State Compensation Insurance Fund
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Folberg, Steven <hr/> Contributor address; City; State; Zip Code  Cotuit, MA 02635-3417	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Rabbi		Employer (See Instructions) FJC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Foreman, Janet <hr/> Contributor address; City; State; Zip Code  Libertyville, IL 60048-3726	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 49/190 Rpt: 52/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Foreman, Janet <hr/> <b>6</b> Contributor address; City; State; Zip Code  Libertyville, IL 60048-3726	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Forrest, Michael <hr/> Contributor address; City; State; Zip Code  Porter Ranch, CA 91326-4122	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Forrest, Michael <hr/> Contributor address; City; State; Zip Code  Porter Ranch, CA 91326-4122	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Foshee, Linda <hr/> Contributor address; City; State; Zip Code  Hattiesburg, MS 39404-8825	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Foshee, Linda <hr/> Contributor address; City; State; Zip Code  Hattiesburg, MS 39404-8825	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 50/190 Rpt: 53/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fossum, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Newport Beach, CA 92660-6396	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Irell & Manella LLP
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Foster, Carol <hr/> Contributor address; City; State; Zip Code  Laguna Beach, CA 92651-2804	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Foster, Hayley <hr/> Contributor address; City; State; Zip Code  Yorktown, VA 23693-4217	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowler, Hubert <hr/> Contributor address; City; State; Zip Code  Chattanooga, TN 37405-4247	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fowler, Norma <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-7324	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 51/190 Rpt: 54/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fox, Andrea	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>6</b> Contributor address; City; State; Zip Code  Pittsburgh, PA 15206-4213		
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Squirrel Hill Health Center
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fox, Lynda	Amount of Contribution (\$)  \$125.00
Contributor address; City; State; Zip Code  Saratoga, CA 95070-6419		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frank, Peter	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Palm Desert, CA 92211-9208		
Principal occupation / Job title (See Instructions) Chief Operating Officer		Employer (See Instructions) Essential Systems Solutions
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fratangelo, Dawn	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Old Chatham, NY 12136-3312		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fratangelo, Dawn	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Old Chatham, NY 12136-3312		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 52/190 Rpt: 55/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fratangelo, Dawn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Old Chatham, NY 12136-3312	<b>7</b> Amount of Contribution (\$)  \$125.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fratangelo, Dawn <hr/> Contributor address; City; State; Zip Code  Old Chatham, NY 12136-3312	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fratangelo, Dawn <hr/> Contributor address; City; State; Zip Code  Old Chatham, NY 12136-3312	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fratangelo, Dawn <hr/> Contributor address; City; State; Zip Code  Old Chatham, NY 12136-3312	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frederick, Jay <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75235-8820	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 53/190 Rpt: 56/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Freeman, Jeff	<b>7</b> Amount of Contribution (\$) \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Santa Monica, CA 90405-4246		
<b>8</b> Principal occupation / Job title (See Instructions) Film Editor		<b>9</b> Employer (See Instructions) Film Criminals, Inc.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Freeman, Sandra	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Dallas, TX 75233-3708		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Freeman, William	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Nashville, TN 37202-3857		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Freeman Webb Com
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Freeman, William	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Nashville, TN 37202-3857		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Freeman Webb Com
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Freiberger, Ann	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code  New Braunfels, TX 78132-2258		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 54/190 Rpt: 57/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) French, Maurice <hr/> <b>6</b> Contributor address; City; State; Zip Code  Ann Arbor, MI 48108-5216	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fried, Hilary <hr/> Contributor address; City; State; Zip Code  Milford, CT 06460-8148	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedland, David <hr/> Contributor address; City; State; Zip Code  Macungie, PA 18062-1410	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Dissabled		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friend, John <hr/> Contributor address; City; State; Zip Code  Angels Camp, CA 95222-0307	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Real Estate Appraiser		Employer (See Instructions) Friends Appraisal Service Team
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friend, John <hr/> Contributor address; City; State; Zip Code  Angels Camp, CA 95222-0307	Amount of Contribution (\$)  \$4.00
Principal occupation / Job title (See Instructions) Real Estate Appraiser		Employer (See Instructions) Friends Appraisal Service Team

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 55/190 Rpt: 58/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Friend, John	<b>7</b> Amount of Contribution (\$)  \$3.00
<b>6</b> Contributor address; City; State; Zip Code  Angels Camp, CA 95222-0307		
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Appraiser		<b>9</b> Employer (See Instructions) Friends Appraisal Service Team
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fritsche, Rhonda	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Meadowlakes, TX 78654-6804		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frost, Jack	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Conway, AR 72032-4226		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frost, Jack	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Conway, AR 72032-4226		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frost, Pamela	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  New York, NY 10023-2413		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 56/190 Rpt: 59/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frye, Mary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Poulsbo, WA 98370-7838	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frye, Mary <hr/> Contributor address; City; State; Zip Code  Poulsbo, WA 98370-7838	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gallagher, Ed <hr/> Contributor address; City; State; Zip Code  San Diego, CA 92103-3994	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gallagher, Susan <hr/> Contributor address; City; State; Zip Code  Cedar Park, TX 78613-1497	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gallagher, Susan <hr/> Contributor address; City; State; Zip Code  Cedar Park, TX 78613-1497	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 57/190 Rpt: 60/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gallagher, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Cedar Park, TX 78613-1497	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gallegos, Jaime <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78232-4830	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Importer		Employer (See Instructions) Durango Imports, LLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gallegos, Michael <hr/> Contributor address; City; State; Zip Code  Houston, TX 77062-3241	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gans, Euphemia <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75071-8589	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Self Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Francee <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-5424	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Importer		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 58/190 Rpt: 61/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garrett, Karen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77019-6432	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gartner, Diane <hr/> Contributor address; City; State; Zip Code  Bloomfield Hills, MI 48302-1342	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garza, Dorothy <hr/> Contributor address; City; State; Zip Code  Seguin, TX 78155-8155	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gavenda, Robert <hr/> Contributor address; City; State; Zip Code  Merizo, DC 96916-0562	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Geiger, Barbara <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98105-5112	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 59/190 Rpt: 62/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Geiger, Barbara <hr/> <b>6</b> Contributor address; City; State; Zip Code  Seattle, WA 98105-5112	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gemignani, Eufaula <hr/> Contributor address; City; State; Zip Code  Alexandria, VA 22312-3129	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) George, Renee <hr/> Contributor address; City; State; Zip Code  Spring, TX 77373-8536	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Accountant Asst		Employer (See Instructions) Anglia Homes LP
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Geraghty, Matt <hr/> Contributor address; City; State; Zip Code  Southbury, CT 06488-2468	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gilfillan, Susan <hr/> Contributor address; City; State; Zip Code  Saint Louis, MO 63108-1946	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Washington University School of Medicine

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 60/190 Rpt: 63/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Girden, Julie	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Tucson, AZ 85718-4120		
<b>8</b> Principal occupation / Job title (See Instructions) Retail		<b>9</b> Employer (See Instructions) Bachs Nursery
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glassner, Sharon	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code  Morton Grove, IL 60053-1562		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glucksman, Roy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Lake Ariel, PA 18436-9544		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goddin, Karen	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code  Lake Oswego, OR 97035-5724		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goddin, Karen	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Lake Oswego, OR 97035-5724		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 61/190 Rpt: 64/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goldberg, Ellen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Stamford, CT 06902-1617	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goldberg, Nancy <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90066-5280	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goldberg, Nancy <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90066-5280	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goldberg, Wendy <hr/> Contributor address; City; State; Zip Code  New York, NY 10001-7326	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) CCO		Employer (See Instructions) iHeart
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goloff, Diane <hr/> Contributor address; City; State; Zip Code  El Cerrito, CA 94530-3110	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 62/190 Rpt: 65/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gonzalez, Ivan <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78212-4443	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Logistics Supervisor		<b>9</b> Employer (See Instructions) Department of Defense
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goodman, Katherine <hr/> Contributor address; City; State; Zip Code  New York, NY 10024-1594	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Mediator		Employer (See Instructions) Self Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goodman, Katherine <hr/> Contributor address; City; State; Zip Code  New York, NY 10024-1594	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Mediator		Employer (See Instructions) Self Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goodman, Katherine <hr/> Contributor address; City; State; Zip Code  New York, NY 10024-1594	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Mediator		Employer (See Instructions) Self Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goodrich, Laurie <hr/> Contributor address; City; State; Zip Code  Orwigsburg, PA 17961-9118	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Biologist		Employer (See Instructions) Hawk MTN

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 63/190 Rpt: 66/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goodwin, George <hr/> <b>6</b> Contributor address; City; State; Zip Code  Hull, MA 02045-1409	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Jolene <hr/> Contributor address; City; State; Zip Code  Fredericksburg, TX 78624-8213	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goshorn, John <hr/> Contributor address; City; State; Zip Code  Anaheim, CA 92804-3941	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Content Manager		Employer (See Instructions) Colbi Technologies
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gradford, Judy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78744-4813	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gradford, Judy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78744-4813	Amount of Contribution (\$)  \$9.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 64/190 Rpt: 67/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Graf, Mary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78728-4457	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Granado, Shirley <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036-3679	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Granado, Shirley <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036-3679	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Graves, Sandra <hr/> Contributor address; City; State; Zip Code  Pearland, TX 77584-7383	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Graves, Sandra <hr/> Contributor address; City; State; Zip Code  Pearland, TX 77584-7383	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 65/190 Rpt: 68/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gray, Ladoria	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>6</b> Contributor address; City; State; Zip Code  Humble, TX 77346-3926		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gray, Susan	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Bryan, TX 77802-2307		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gray, Susan	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Bryan, TX 77802-2307		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gray, Susan	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Bryan, TX 77802-2307		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Green, Stacey	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Beaumont, TX 77706-8728		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 66/190 Rpt: 69/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Richard <hr/> <b>6</b> Contributor address; City; State; Zip Code  Boynton Beach, FL 33473-5065	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Richard <hr/> Contributor address; City; State; Zip Code  Boynton Beach, FL 33473-5065	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greenspun, Virginia <hr/> Contributor address; City; State; Zip Code  Sherman Oaks, CA 91423-2120	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gregory, James <hr/> Contributor address; City; State; Zip Code  Dublin, OH 43016-9489	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) GDT
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gregory, James <hr/> Contributor address; City; State; Zip Code  Dublin, OH 43016-9489	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) GDT

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 67/190 Rpt: 70/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gregory, James	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>6</b> Contributor address; City; State; Zip Code  Dublin, OH 43016-9489		
<b>8</b> Principal occupation / Job title (See Instructions) Sales		<b>9</b> Employer (See Instructions) GDT
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gregory, Jim	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Dublin, OH 43016-9489		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) GDT
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gregory, Jim	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Dublin, OH 43016-9489		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) GDT
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gregory, Jim	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Dublin, OH 43016-9489		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) GDT
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grela, Barbra	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Easton, MD 21601-6268		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 68/190 Rpt: 71/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Griffiths, Marilyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Jose, CA 95121-1257	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grigsby, Jim <hr/> Contributor address; City; State; Zip Code  Ward, CO 80481-9529	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Neuroscientist		Employer (See Instructions) University of Colorado Denver
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guerra, Jerry <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78414-6151	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guerra, Jerry <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78414-6151	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guerrero, Frances <hr/> Contributor address; City; State; Zip Code  Pleasanton, TX 78064-6549	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 69/190 Rpt: 72/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gurule, Colleen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Menifee, CA 92584-6830	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haas, Carolyn <hr/> Contributor address; City; State; Zip Code  Bellows Falls, VT 05101-3015	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Education Consultant		Employer (See Instructions) Self Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haddad, Susan <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-6523	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hailey, Sharyn <hr/> Contributor address; City; State; Zip Code  Atlanta, GA 30310-2363	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Halmos, Vicki <hr/> Contributor address; City; State; Zip Code  Palm Beach, FL 33480-4489	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 70/190 Rpt: 73/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hams, Annemarie	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Woodstock, IL 60098-4119		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hams, Annemarie	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Woodstock, IL 60098-4119		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hankinson, Barbara	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Plano, TX 75075-7208		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) DADS Texas
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hansen, Marilyn	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Palo Alto, CA 94306-4502		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrell, Jackson	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Dallas, TX 75252-6861		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 71/190 Rpt: 74/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrington, Joan	<b>7</b> Amount of Contribution (\$)  \$7.50
<b>6</b> Contributor address; City; State; Zip Code  Aromas, CA 95004-9513		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrington, Joan	Amount of Contribution (\$)  \$7.50
Contributor address; City; State; Zip Code  Aromas, CA 95004-9513		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris, Antoinette	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Round Rock, TX 78665-4007		
Principal occupation / Job title (See Instructions) Claim Specialist		Employer (See Instructions) State Farm
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris, Antoinette	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Round Rock, TX 78665-4007		
Principal occupation / Job title (See Instructions) Claim Specialist		Employer (See Instructions) State Farm
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrison, Ralph	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  League City, TX 77573-4539		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 72/190 Rpt: 75/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hartley, Diane <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75209-5607	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) General Manager		<b>9</b> Employer (See Instructions) McKissock
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haschke, Donna <hr/> Contributor address; City; State; Zip Code  Buda, TX 78610-2827	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haygood, Kevin <hr/> Contributor address; City; State; Zip Code  Lake Forest, CA 92630-6548	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hayward, Lori <hr/> Contributor address; City; State; Zip Code  Carrollton, TX 75010-1139	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hdeworkman, Mara <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76902-0701	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 73/190 Rpt: 76/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Heiserman, Sonya <hr/> <b>6</b> Contributor address; City; State; Zip Code  Spring Valley, CA 91977-7002	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Heiserman, Sonya <hr/> Contributor address; City; State; Zip Code  Spring Valley, CA 91977-7002	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hemingway, David <hr/> Contributor address; City; State; Zip Code  Saint Louis, MO 63118-2628	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Federal Public Defenders
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henderson, Everlene <hr/> Contributor address; City; State; Zip Code  Oriental, NC 28571-9307	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Herbert, Georgia <hr/> Contributor address; City; State; Zip Code  The Plains, VA 20198-0175	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 74/190 Rpt: 77/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernandez, Oren <hr/> <b>6</b> Contributor address; City; State; Zip Code  Coos Bay, OR 97420-3389	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Telecom Engineer		<b>9</b> Employer (See Instructions) SYKES enterprises, Inc.
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernandez, Oren <hr/> Contributor address; City; State; Zip Code  Coos Bay, OR 97420-3389	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Telecom Engineer		Employer (See Instructions) SYKES enterprises, Inc.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hettrich, Darcy <hr/> Contributor address; City; State; Zip Code  Milford, CT 06460-4508	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hiestand, Bryan <hr/> Contributor address; City; State; Zip Code  El Cerrito, CA 94530-3616	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) PubNub
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hildebrand, David <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78228-2534	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 75/190 Rpt: 78/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hildebrand, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78228-2534	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hill, Tommy <hr/> Contributor address; City; State; Zip Code  Savannah, GA 31405-1024	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hilton Pace, Shelley <hr/> Contributor address; City; State; Zip Code  Weatherford, TX 76085-8348	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hinojosa, Laura <hr/> Contributor address; City; State; Zip Code  New Hudson, MI 48165-9003	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) WTVS
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hinshaw, Kirk <hr/> Contributor address; City; State; Zip Code  Sonoma, CA 95476-7317	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 76/190 Rpt: 79/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hinshaw, Kirk <hr/> <b>6</b> Contributor address; City; State; Zip Code  Sonoma, CA 95476-7317	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hobart, Ann <hr/> Contributor address; City; State; Zip Code  Phoenix, AZ 85003-1105	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Arizona
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hodges, David <hr/> Contributor address; City; State; Zip Code  Midlothian, TX 76065-8864	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holden, Ruth <hr/> Contributor address; City; State; Zip Code  Jefferson, ME 04348-3878	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holden, Ruth <hr/> Contributor address; City; State; Zip Code  Jefferson, ME 04348-3878	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 77/190 Rpt: 80/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hollidge, Margaret <hr/> <b>6</b> Contributor address; City; State; Zip Code  Glen Burnie, MD 21060-6535	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hollidge, Margaret <hr/> Contributor address; City; State; Zip Code  Glen Burnie, MD 21060-6535	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howell, Joe <hr/> Contributor address; City; State; Zip Code  Santa Barbara, CA 93105-3511	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Howell Moore & Gough LLP
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hughes, Andre <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75227-2778	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Machine Operator		Employer (See Instructions) Chrysler
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hummel, Charlene <hr/> Contributor address; City; State; Zip Code  Vacaville, CA 95688-2401	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) DOD



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 78/190 Rpt: 81/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Humphries, Jennifer <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78259-2439	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hundley, Margaret <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025-3307	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hunter, Dixie <hr/> Contributor address; City; State; Zip Code  Castle Rock, CO 80109-7935	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hunter Head, Becky <hr/> Contributor address; City; State; Zip Code  Pasadena, TX 77504-3037	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Accounting Manager		Employer (See Instructions) L-Con, Inc.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hute, Darrell <hr/> Contributor address; City; State; Zip Code  Lincoln, NE 68520-9495	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 79/190 Rpt: 82/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jackson, Dwight <hr/> <b>6</b> Contributor address; City; State; Zip Code  Spring, TX 77379-6418	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Substitute Teacher		<b>9</b> Employer (See Instructions) Klein ISD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jackson, Jon <hr/> Contributor address; City; State; Zip Code  Valley Village, CA 91601-4348	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Television Production		Employer (See Instructions) Self Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jacobs, Leni <hr/> Contributor address; City; State; Zip Code  Indio, CA 92203-7420	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jaeger, Rudolph <hr/> Contributor address; City; State; Zip Code  Westwood, NJ 07675-2605	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Toxicologist		Employer (See Instructions) CH Technologies (USA), Inc.
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jaeger, Rudolph <hr/> Contributor address; City; State; Zip Code  Westwood, NJ 07675-2605	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Toxicologist		Employer (See Instructions) CH Technologies (USA), Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 80/190 Rpt: 83/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jamrog, Nancy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Merrimack, NH 03054-3001	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Music Teacher		<b>9</b> Employer (See Instructions) Self Employed
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Carrie <hr/> Contributor address; City; State; Zip Code  Longwood, FL 32750-5475	Amount of Contribution (\$)  \$3.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, David <hr/> Contributor address; City; State; Zip Code  Baltimore, MD 21231-3565	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Dr <hr/> Contributor address; City; State; Zip Code  Arlington, TX 76002-5557	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Lynn <hr/> Contributor address; City; State; Zip Code  Storrs Mansfield, CT 06268-2218	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 81/190 Rpt: 84/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Willie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75232-2450	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jolley, Susan <hr/> Contributor address; City; State; Zip Code  Delran, NJ 08075-2221	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Darrell <hr/> Contributor address; City; State; Zip Code  Port Townsend, WA 98368-6604	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Jeffrey <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90067-2701	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, William <hr/> Contributor address; City; State; Zip Code  Falls Church, VA 22046-2537	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Government Employee		Employer (See Instructions) FDIC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 82/190 Rpt: 85/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joos, William <hr/> <b>6</b> Contributor address; City; State; Zip Code  Jacksonville, FL 32207-7634	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Duss Kenney Safer Hampton & Joos Pa
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Judd, David <hr/> Contributor address; City; State; Zip Code  Longview, TX 75604-3043	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) Presbyterian Church
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kahle, Judith <hr/> Contributor address; City; State; Zip Code  Fairfield, CA 94533-5146	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kahr, Frank <hr/> Contributor address; City; State; Zip Code  South Chatham, MA 02659-1555	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kantner, Mildred <hr/> Contributor address; City; State; Zip Code  Northridge, CA 91324-2409	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 83/190 Rpt: 86/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karny, Lori	<b>7</b> Amount of Contribution (\$) \$22.00
	<b>6</b> Contributor address; City; State; Zip Code  Los Angeles, CA 90048-5126	
<b>8</b> Principal occupation / Job title (See Instructions) Clinical Social Worker		<b>9</b> Employer (See Instructions) Self Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Katz, Ronald	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Saint Helena, CA 94574-0430	
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Self Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Keehn, Suzanne	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Palo Alto, CA 94306-3136	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Keller, Mary	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code  San Francisco, CA 94112-1325	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Keller, Roni	Amount of Contribution (\$) \$11.00
	Contributor address; City; State; Zip Code  Newbury Park, CA 91320-3452	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 84/190 Rpt: 87/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/24/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelly, Gordon <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76116-8236	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Computer Analyst		<b>9</b> Employer (See Instructions) eiPi10, LLC
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelly, John <hr/> Contributor address; City; State; Zip Code  Avon, CT 06001-4547	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kennedy, Linda <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79424-1417	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Wayland Baptist University
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kennedy, Linda <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79424-1417	Amount of Contribution (\$)  \$1.50
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Wayland Baptist University
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kennedy, Linda <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79424-1417	Amount of Contribution (\$)  \$8.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Wayland Baptist University

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 85/190 Rpt: 88/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Linda	<b>7</b> Amount of Contribution (\$)  \$12.50
	<b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79424-1417	
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions) Wayland Baptist University
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Linda	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79424-1417	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Wayland Baptist University
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Linda	Amount of Contribution (\$)  \$8.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79424-1417	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Wayland Baptist University
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Linda	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79424-1417	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Wayland Baptist University
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keremitsis, Eileen	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  San Francisco, CA 94114-2397	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 86/190 Rpt: 89/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kerr, Suzanne <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77005-2745	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kerr, Suzanne <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005-2745	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ketover, Dede <hr/> Contributor address; City; State; Zip Code  West Roxbury, MA 02132-1619	Amount of Contribution (\$)  \$16.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kettle, Emele <hr/> Contributor address; City; State; Zip Code  Spring, TX 77386-4363	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kettle, Emele <hr/> Contributor address; City; State; Zip Code  Spring, TX 77386-4363	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 87/190 Rpt: 90/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Key, Jolie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Encino, CA 91316-4306	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Key, Jolie <hr/> Contributor address; City; State; Zip Code  Encino, CA 91316-4306	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kickerillo, Vincent <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Builders		Employer (See Instructions) Self Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) King, Elizabeth <hr/> Contributor address; City; State; Zip Code  Sausalito, CA 94965-2407	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) King, Elizabeth <hr/> Contributor address; City; State; Zip Code  Sausalito, CA 94965-2407	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 88/190 Rpt: 91/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Klamann, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  Boulder, CO 80303-1264	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Klivans, Elinor <hr/> Contributor address; City; State; Zip Code  Camden, ME 04843-1616	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Klivans, Elinor <hr/> Contributor address; City; State; Zip Code  Camden, ME 04843-1616	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Klivans, Elinor <hr/> Contributor address; City; State; Zip Code  Camden, ME 04843-1616	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Knezovich, Michael <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60605-1825	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Communications		Employer (See Instructions) PHIUS

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 89/190 Rpt: 92/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Koplovitz, Kay <hr/> <b>6</b> Contributor address; City; State; Zip Code  New York, NY 10023-6296	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Investor Advisor		<b>9</b> Employer (See Instructions) Koplovitz & Co
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Koplovitz, Kay <hr/> Contributor address; City; State; Zip Code  New York, NY 10023-6296	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Investor Advisor		Employer (See Instructions) Koplovitz & Co
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kopp, Douglas <hr/> Contributor address; City; State; Zip Code  Lauderdale By The Sea, FL 33308-3020	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Koster, Wendy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75223-1210	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kraljevic, Ivan <hr/> Contributor address; City; State; Zip Code  Coral Springs, FL 33076-4001	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Electrical Engineer		Employer (See Instructions) Motorola Solutions

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 90/190 Rpt: 93/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/29/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Krasnogor, Lester <hr/> <b>6</b> Contributor address; City; State; Zip Code  Chappaqua, NY 10514-2513	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Krasnogor, Lester <hr/> Contributor address; City; State; Zip Code  Chappaqua, NY 10514-2513	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Krueger, Marlene <hr/> Contributor address; City; State; Zip Code  Estes Park, CO 80517-9202	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Krysinski, Ellen <hr/> Contributor address; City; State; Zip Code  Munhall, PA 15120-3443	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kuo, Ellen <hr/> Contributor address; City; State; Zip Code  Pearland, TX 77584-9127	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Physician Assistant		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 91/190 Rpt: 94/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kurz, Theresa	<b>7</b> Amount of Contribution (\$) \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75287-7543		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lachenmeier, Rudy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Newberg, OR 97132-1038		
Principal occupation / Job title (See Instructions) Mediation		Employer (See Instructions) Self Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lachenmeier, Rudy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Newberg, OR 97132-1038		
Principal occupation / Job title (See Instructions) Mediation		Employer (See Instructions) Self Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lake, David	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Belvedere, CA 94920-2461		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lakenbach, Cary	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code  West Hartford, CT 06107-1148		
Principal occupation / Job title (See Instructions) Actuary		Employer (See Instructions) Actuarial Strategies, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 92/190 Rpt: 95/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lakenbach, Cary <hr/> <b>6</b> Contributor address; City; State; Zip Code  West Hartford, CT 06107-1148	<b>7</b> Amount of Contribution (\$)  \$3.50
<b>8</b> Principal occupation / Job title (See Instructions) Actuary		<b>9</b> Employer (See Instructions) Actuarial Strategies, Inc.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lally, Helen <hr/> Contributor address; City; State; Zip Code  New York, NY 10128-1733	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Helen D. Lally Fine Arts
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lamin, Marilyn <hr/> Contributor address; City; State; Zip Code  Austin, TX 78747-1660	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lampka, Joseph <hr/> Contributor address; City; State; Zip Code  Fleming Island, FL 32003-7273	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lang, Susan <hr/> Contributor address; City; State; Zip Code  Asheville, NC 28803-6303	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 93/190 Rpt: 96/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lannen, Eleanor <hr/> <b>6</b> Contributor address; City; State; Zip Code  Walnut Creek, CA 94595-2535	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lapointe, Elaine <hr/> Contributor address; City; State; Zip Code  Quincy, MA 02169-8901	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lapoma, Gayle <hr/> Contributor address; City; State; Zip Code  Succasunna, NJ 07876-1547	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Larsen, Alberta <hr/> Contributor address; City; State; Zip Code  Half Moon Bay, CA 94019-2219	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Latimer, Cliff <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90027-3219	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 94/190 Rpt: 97/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leach, Jacqueline	<b>7</b> Amount of Contribution (\$) \$12.50
<b>6</b> Contributor address; City; State; Zip Code  Scituate, MA 02066-4400		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leach, Jacqueline	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Scituate, MA 02066-4400		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leach, Jacqueline	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Scituate, MA 02066-4400		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leahy, John	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  New York, NY 10075-0094		
Principal occupation / Job title (See Instructions) Marketer		Employer (See Instructions) Brightbuoy Marketing
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leary, Patricia	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code  Naples, FL 34120-0642		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 95/190 Rpt: 98/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/29/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leary, Patricia	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Naples, FL 34120-0642		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leary, Patricia	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Naples, FL 34120-0642		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leary, Patricia	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Naples, FL 34120-0642		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leary, Patricia	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Naples, FL 34120-0642		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lebsack, Dennis	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Loveland, CO 80538-3442		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 96/190 Rpt: 99/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/24/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lebsack, Dennis <hr/> <b>6</b> Contributor address; City; State; Zip Code  Loveland, CO 80538-3442	<b>7</b> Amount of Contribution (\$)  \$12.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lee, D. <hr/> Contributor address; City; State; Zip Code  New York, NY 10024-3211	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lee, James <hr/> Contributor address; City; State; Zip Code  Houston, TX 77059-5515	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lee, John <hr/> Contributor address; City; State; Zip Code  Fort Lauderdale, FL 33312-4107	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lee-Bryant, Helen <hr/> Contributor address; City; State; Zip Code  Montgomery, TX 77316-1867	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Helen Lee-Bryant Bookkeeping Service

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 97/190 Rpt: 100/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leimer, Kerry <hr/> <b>6</b> Contributor address; City; State; Zip Code  Makawao, HI 96768-8206	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leming, James <hr/> Contributor address; City; State; Zip Code  New Berlin, WI 53146-3509	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lenkowsky, Steven <hr/> Contributor address; City; State; Zip Code  Norwalk, CT 06851-3825	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lentz, Sarah <hr/> Contributor address; City; State; Zip Code  Weaverville, NC 28787-0645	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Landlady		Employer (See Instructions) Lentz Properties, Inc.
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lepore, Lawrence <hr/> Contributor address; City; State; Zip Code  Pompton Lakes, NJ 07442-1331	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 98/190 Rpt: 101/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lepore, Lawrence <hr/> <b>6</b> Contributor address; City; State; Zip Code  Pompton Lakes, NJ 07442-1331	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Letson, Janette <hr/> Contributor address; City; State; Zip Code  Lakewood, CO 80226-1364	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leventry, Nancy <hr/> Contributor address; City; State; Zip Code  Naperville, IL 60540-6352	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levinson, Rebecca <hr/> Contributor address; City; State; Zip Code  New York, NY 10003-8761	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levinson, Rebecca <hr/> Contributor address; City; State; Zip Code  New York, NY 10003-8761	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 99/190 Rpt: 102/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levinson, Rebecca <hr/> <b>6</b> Contributor address; City; State; Zip Code  New York, NY 10003-8761	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Musician		<b>9</b> Employer (See Instructions) Self Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levy, Eugene <hr/> Contributor address; City; State; Zip Code  Bay Shore, NY 11706	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lewis, Mary <hr/> Contributor address; City; State; Zip Code  Blackshear, GA 31516-6003	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lewis, William <hr/> Contributor address; City; State; Zip Code  Coalinga, CA 93210-1842	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leyendecker, M. <hr/> Contributor address; City; State; Zip Code  Houston, TX 77077-5613	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 100/190 Rpt: 103/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Light, Lawrence <hr/> <b>6</b> Contributor address; City; State; Zip Code  Mission Viejo, CA 92691-5121	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Linn, Kelby <hr/> Contributor address; City; State; Zip Code  Bradenton, FL 34205-6714	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) ACP Real Estate, Inc.
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Linn, Kelby <hr/> Contributor address; City; State; Zip Code  Bradenton, FL 34205-6714	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) ACP Real Estate, Inc.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lister, Sidney <hr/> Contributor address; City; State; Zip Code  Austin, TX 78749-1641	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Littlejohn, Mary <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77478-4508	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 101/190 Rpt: 104/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Litwak, Taina <hr/> <b>6</b> Contributor address; City; State; Zip Code  Gaithersburg, MD 20878-3556	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Scientific Illustrator		<b>9</b> Employer (See Instructions) US Dept. of Agriculture
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lobo, Michael <hr/> Contributor address; City; State; Zip Code  Houston, TX 77062-3657	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lodolo, Gena <hr/> Contributor address; City; State; Zip Code  Edina, MN 55436-1029	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lodolo, Gena <hr/> Contributor address; City; State; Zip Code  Edina, MN 55436-1029	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Logue, George <hr/> Contributor address; City; State; Zip Code  Hurst, TX 76054-3504	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 102/190 Rpt: 105/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lombardi, Joseph	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77058		
<b>8</b> Principal occupation / Job title (See Instructions) Marine Surveyor		<b>9</b> Employer (See Instructions) Self Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Long, Gaye	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Houston, TX 77077-1743		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lonsway, Philip	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Spring, TX 77379-7462		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Looby, Judtih	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  North Fork, CA 93643-9514		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Looby, Judtih	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  North Fork, CA 93643-9514		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 103/190 Rpt: 106/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lucero, Fred <hr/> <b>6</b> Contributor address; City; State; Zip Code  Albuquerque, NM 87105-3938	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lucero, Fred <hr/> Contributor address; City; State; Zip Code  Albuquerque, NM 87105-3938	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Luciani, Curtis <hr/> Contributor address; City; State; Zip Code  Austin, TX 78723-3149	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Customer Support		Employer (See Instructions) Square Root, Inc.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Luciani, Curtis <hr/> Contributor address; City; State; Zip Code  Austin, TX 78723-3149	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Customer Support		Employer (See Instructions) Square Root, Inc.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lunt, John <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76123-1939	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 104/190 Rpt: 107/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lunt, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76123-1939	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lutz, Larry <hr/> Contributor address; City; State; Zip Code  Thousand Oaks, CA 91360-1829	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Macdonald, Deborah <hr/> Contributor address; City; State; Zip Code  Omaha, NE 68118-3528	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Main, Edward <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098-2516	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Malagisi, Ken <hr/> Contributor address; City; State; Zip Code  Wheat Ridge, CO 80214-8449	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Saw Horse Projects LLC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 105/190 Rpt: 108/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mancini, Leeanne <hr/> <b>6</b> Contributor address; City; State; Zip Code  Vancouver, WA 98684-6991	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Manners, Marilyn <hr/> Contributor address; City; State; Zip Code  Berkeley, CA 94709-1608	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mansfield, Roger <hr/> Contributor address; City; State; Zip Code  Lawrenceville, GA 30044-5663	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Margolin, Renee <hr/> Contributor address; City; State; Zip Code  Butte Valley, CA 95965-9190	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mark-Walker, Charles <hr/> Contributor address; City; State; Zip Code  North Hills, CA 91343-1831	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Design		Employer (See Instructions) SMH

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 106/190 Rpt: 109/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mark-Walker, Charles <hr/> <b>6</b> Contributor address; City; State; Zip Code  North Hills, CA 91343-1831	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Design		<b>9</b> Employer (See Instructions) SMH
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mart, Gary <hr/> Contributor address; City; State; Zip Code  River Forest, IL 60305-1426	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Psychiatrist		Employer (See Instructions) Self Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mart, Gary <hr/> Contributor address; City; State; Zip Code  River Forest, IL 60305-1426	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Psychiatrist		Employer (See Instructions) Self Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martinez, Ileana <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79902-2222	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) El Paso Kidney Specialists
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martinez, Jose <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78232-4429	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Kindred Hospice

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 107/190 Rpt: 110/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martinez, Monica <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78736-1756	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Director		<b>9</b> Employer (See Instructions) Texas Education Agency
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martinez, Sergio <hr/> Contributor address; City; State; Zip Code  Norwalk, CA 90650-3832	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Hacienda La Puente Usd
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martinez, Sergio <hr/> Contributor address; City; State; Zip Code  Norwalk, CA 90650-3832	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Hacienda La Puente Usd
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Masterson, Amanda <hr/> Contributor address; City; State; Zip Code  Austin, TX 78750-3044	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Matlock, Benjamin <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76244-5909	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Security Officer		Employer (See Instructions) Good Guard Security Services, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 108/190 Rpt: 111/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maynard, Stephen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Trussville, AL 35173-4278	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maynard, Stephen <hr/> Contributor address; City; State; Zip Code  Trussville, AL 35173-4278	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McAdoo, Thomas <hr/> Contributor address; City; State; Zip Code  Celebration, FL 34747-5312	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions) Universal Studios Orlando
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCants, Michael <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-5405	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCarthy, Daniel <hr/> Contributor address; City; State; Zip Code  North Bend, OR 97459-3625	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 109/190 Rpt: 112/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/29/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCommon, Marjorie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60623-2259	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McFadden-Hightower, Delbra <hr/> Contributor address; City; State; Zip Code  Converse, TX 78109-3333	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McFadden-Hightower, Delbra <hr/> Contributor address; City; State; Zip Code  Converse, TX 78109-3333	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGehee, David <hr/> Contributor address; City; State; Zip Code  Cypress, TX 77429-6967	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGinnis, Susan <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-7630	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 110/190 Rpt: 113/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/29/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGlamery, Gayla <hr/> <b>6</b> Contributor address; City; State; Zip Code  Baltimore, MD 21218-1708	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions) Loyola U Md
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McJunkin, Dale <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633-5736	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McLean, Dolores <hr/> Contributor address; City; State; Zip Code  San Diego, CA 92115-1918	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McMahon-Pratt, Diane <hr/> Contributor address; City; State; Zip Code  Covina, CA 91722-2519	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McMillan, Jan <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-3605	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 111/190 Rpt: 114/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McMillian, Mary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Chapel Hill, NC 27517-8943	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McNicholas, Helen <hr/> Contributor address; City; State; Zip Code  Mesa, AZ 85209-6730	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McRee, Briana <hr/> Contributor address; City; State; Zip Code  Maple Valley, WA 98038-7311	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Medford, Michael <hr/> Contributor address; City; State; Zip Code  Raleigh, NC 27612-3970	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Manning Fulton & Skinner
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Medford, Michael <hr/> Contributor address; City; State; Zip Code  Raleigh, NC 27612-3970	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Manning Fulton & Skinner

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 112/190 Rpt: 115/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Medford, Michael <hr/> <b>6</b> Contributor address; City; State; Zip Code  Raleigh, NC 27612-3970	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Manning Fulton & Skinner
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Medrano, Diana <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78251-2441	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Medrano, Diana <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78251-2441	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mennella, Mathew <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98119-1714	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) M Squared Specialty Goods
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mercado, Alma <hr/> Contributor address; City; State; Zip Code  Humble, TX 77338-1832	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 113/190 Rpt: 116/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Messina, Grace <hr/> <b>6</b> Contributor address; City; State; Zip Code  North Fort Myers, FL 33917-7154	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Messina, Grace <hr/> Contributor address; City; State; Zip Code  North Fort Myers, FL 33917-7154	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Michaels, Judith <hr/> Contributor address; City; State; Zip Code  Austin, TX 78749-3894	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Sarah <hr/> Contributor address; City; State; Zip Code  Bryn Mawr, PA 19010-1908	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Sarah <hr/> Contributor address; City; State; Zip Code  Bryn Mawr, PA 19010-1908	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 114/190 Rpt: 117/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Virginia <hr/> <b>6</b> Contributor address; City; State; Zip Code  North Bethesda, MD 20852-3344	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Public Relations		<b>9</b> Employer (See Instructions) Virginia Miller Communications, LLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mills, Margaret <hr/> Contributor address; City; State; Zip Code  Austin, TX 78722-1214	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mills, Margaret <hr/> Contributor address; City; State; Zip Code  Austin, TX 78722-1214	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miranda, Roberto <hr/> Contributor address; City; State; Zip Code  Cedar Park, TX 78613-2893	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mitchell, Billie <hr/> Contributor address; City; State; Zip Code  Corsicana, TX 75110-3412	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 115/190 Rpt: 118/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mitchell, Billie	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Corsicana, TX 75110-3412		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mitchell, Billie	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Corsicana, TX 75110-3412		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mitleyng, Joseph	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Grand Blanc, MI 48439-2674		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mok, Carolyn	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  Martinez, CA 94553-5815		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mok, Carolyn	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  Martinez, CA 94553-5815		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 116/190 Rpt: 119/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mok, Carolyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Martinez, CA 94553-5815	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Monder, Steven <hr/> Contributor address; City; State; Zip Code  Cincinnati, OH 45215-4105	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Monder, Steven <hr/> Contributor address; City; State; Zip Code  Cincinnati, OH 45215-4105	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Monder, Steven <hr/> Contributor address; City; State; Zip Code  Cincinnati, OH 45215-4105	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Monford, Roseanne <hr/> Contributor address; City; State; Zip Code  Canyon Lake, TX 78133-5533	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 117/190 Rpt: 120/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mooney, Maureen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60657-1914	<b>7</b> Amount of Contribution (\$)  \$4.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moos, Susan <hr/> Contributor address; City; State; Zip Code  Naples, FL 34113-8083	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morales, Elena <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79903-1902	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Clint isd
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morales, Monica <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94122-3530	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moreno, Oscar <hr/> Contributor address; City; State; Zip Code  Watsonville, CA 95076-3554	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 118/190 Rpt: 121/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moreno, Oscar <hr/> <b>6</b> Contributor address; City; State; Zip Code  Watsonville, CA 95076-3554	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morrisey, Jerry <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78259-2327	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Laboratory Director		Employer (See Instructions) Self Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morrison, Gerhardt <hr/> Contributor address; City; State; Zip Code  Hailey, ID 83333-8498	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morrison, Mary <hr/> Contributor address; City; State; Zip Code  Piedmont, CA 94611-5185	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morrison, Mary <hr/> Contributor address; City; State; Zip Code  Piedmont, CA 94611-5185	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 119/190 Rpt: 122/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Munroe, George <hr/> <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413-4336	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Munroe, George <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78413-4336	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murdock, Gail <hr/> Contributor address; City; State; Zip Code  Washington, DC 20017-2618	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murdock, Gail <hr/> Contributor address; City; State; Zip Code  Washington, DC 20017-2618	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murphy, Carol <hr/> Contributor address; City; State; Zip Code  Austin, TX 78727-5357	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 120/190 Rpt: 123/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murphy, Dennis <hr/> <b>6</b> Contributor address; City; State; Zip Code  Reno, NV 89511-6300	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Environmental Consultant		<b>9</b> Employer (See Instructions) Self Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murphy, William <hr/> Contributor address; City; State; Zip Code  Albany, CA 94706-1465	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murray, Frederic <hr/> Contributor address; City; State; Zip Code  Atascadero, CA 93422-2821	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Computer Programmer		Employer (See Instructions) Self Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murray, Julie <hr/> Contributor address; City; State; Zip Code  Plano, TX 75025-4111	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murray Fimbel, Marianne <hr/> Contributor address; City; State; Zip Code  Lambertville, NJ 08530-3305	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 121/190 Rpt: 124/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Myers, Amy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Birmingham, AL 35235-3272	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self Employed
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Myers, Steven <hr/> Contributor address; City; State; Zip Code  Fort Lauderdale, FL 33308-6012	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Myers, Steven <hr/> Contributor address; City; State; Zip Code  Fort Lauderdale, FL 33308-6012	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mytheo, Felicien <hr/> Contributor address; City; State; Zip Code  Grapevine, TX 76051-5195	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) Uber
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nakawatase, Ed <hr/> Contributor address; City; State; Zip Code  Philadelphia, PA 19119-3264	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 122/190 Rpt: 125/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nelson, Ellen	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>6</b> Contributor address; City; State; Zip Code  Danville, CA 94526-6227		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nelson, Randy	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Dallas, TX 75238-4203		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) ThompsonCoe
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nelson, Vernon	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  New Braunfels, TX 78130-6516		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nelson, Vernon	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  New Braunfels, TX 78130-6516		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Newell, Elizabeth	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  River Forest, IL 60305-1438		
Principal occupation / Job title (See Instructions) Carriage Flowers		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 123/190 Rpt: 126/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Newkirk, Lynn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lexington Park, MD 20653-2446	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nicholls, Judith <hr/> Contributor address; City; State; Zip Code  Wimberley, TX 78676-6065	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nicholls, Judith <hr/> Contributor address; City; State; Zip Code  Wimberley, TX 78676-6065	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nicholson, Joseph <hr/> Contributor address; City; State; Zip Code  Wilmington, DE 19803-2627	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Young Conaway Stargatt & Taylor, LLP
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nieves, Wanda <hr/> Contributor address; City; State; Zip Code  Howell, NJ 07731-2345	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 124/190 Rpt: 127/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Noble, Deborah <hr/> <b>6</b> Contributor address; City; State; Zip Code  Eugene, OR 97405-4606	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Owner		<b>9</b> Employer (See Instructions) West Wind Forest Products
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nordahl, Thomas <hr/> Contributor address; City; State; Zip Code  Davis, CA 95616-2606	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UCD
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nordahl, Thomas <hr/> Contributor address; City; State; Zip Code  Davis, CA 95616-2606	Amount of Contribution (\$)  \$8.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UCD
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Norris, Jana <hr/> Contributor address; City; State; Zip Code  Sherman, TX 75092-5231	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Boyle, Doug <hr/> Contributor address; City; State; Zip Code  Burke, VA 22015-4520	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 125/190 Rpt: 128/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Obrien, Gerard <hr/> <b>6</b> Contributor address; City; State; Zip Code  Brea, CA 92821-4420	<b>7</b> Amount of Contribution (\$)  \$3.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Obrien, Gerard <hr/> Contributor address; City; State; Zip Code  Brea, CA 92821-4420	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ofurhie, Julian <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77478-5482	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ofurhie, Julian <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77478-5482	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ojile, Judith <hr/> Contributor address; City; State; Zip Code  Wildwood, MO 63011-1920	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 126/190 Rpt: 129/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ojile, Judith <hr/> <b>6</b> Contributor address; City; State; Zip Code  Wildwood, MO 63011-1920	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ojile, Judith <hr/> Contributor address; City; State; Zip Code  Wildwood, MO 63011-1920	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ojile, Judith <hr/> Contributor address; City; State; Zip Code  Wildwood, MO 63011-1920	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ojile, Judith <hr/> Contributor address; City; State; Zip Code  Wildwood, MO 63011-1920	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ojile, Judith <hr/> Contributor address; City; State; Zip Code  Wildwood, MO 63011-1920	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 127/190 Rpt: 130/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/29/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olive, Marilyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76177-7394	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oliver-Smith, Anthony <hr/> Contributor address; City; State; Zip Code  Gainesville, FL 32605-5321	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ortiz, Charles <hr/> Contributor address; City; State; Zip Code  New York, NY 10029-5773	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ortiz, Charles <hr/> Contributor address; City; State; Zip Code  New York, NY 10029-5773	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ortiz, Charles <hr/> Contributor address; City; State; Zip Code  New York, NY 10029-5773	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 128/190 Rpt: 131/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ortiz, Charles	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>6</b> Contributor address; City; State; Zip Code  New York, NY 10029-5773		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ortiz, Charles	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  New York, NY 10029-5773		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ostapik, Judith	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  San Francisco, CA 94127-2549		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ott, Mary	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Omaha, NE 68135-1336		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) P Bouffard, Maurice	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Saint Johnsbury, VT 05819-1448		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 129/190 Rpt: 132/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Palmer, Duane	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Wichita Falls, TX 76308-2464		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Palmer, Duane	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Wichita Falls, TX 76308-2464		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Panagos, Kally	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  North Potomac, MD 20878-4815		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pandolfi, Alfred	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Arlington, TX 76016-3329		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Panepinto, Paul	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Woodbridge, NJ 07095-1027		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 130/190 Rpt: 133/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paris, Howard	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>6</b> Contributor address; City; State; Zip Code  Los Angeles, CA 90066-5426		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paris, Howard	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  Los Angeles, CA 90066-5426		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Park, J.	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Takoma Park, MD 20912-4636		
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) JSSA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, Patricia	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Cambridge, MA 02139-4466		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, Patricia	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Cambridge, MA 02139-4466		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 131/190 Rpt: 134/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, William <hr/> <b>6</b> Contributor address; City; State; Zip Code  Troy, MO 63379-2423	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Not Employed
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, William <hr/> Contributor address; City; State; Zip Code  Troy, MO 63379-2423	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parmar, Harish <hr/> Contributor address; City; State; Zip Code  Spring, TX 77382-1419	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parmar, Harish <hr/> Contributor address; City; State; Zip Code  Spring, TX 77382-1419	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parra, Beatriz <hr/> Contributor address; City; State; Zip Code  North Richland Hills, TX 76180-7848	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 132/190 Rpt: 135/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parra, Beatriz <hr/> <b>6</b> Contributor address; City; State; Zip Code  River Oaks, TX 76114-2849	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parsons, Leslie <hr/> Contributor address; City; State; Zip Code  Dayton, OH 45449-2247	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paterson, Eva <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94605-5603	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pavelko, Ian <hr/> Contributor address; City; State; Zip Code  Madison, WI 53704-4007	Amount of Contribution (\$)  \$16.00
Principal occupation / Job title (See Instructions) Budget Technician		Employer (See Instructions) USGS Upper Midwest Water Science Center
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pavelko, Ian <hr/> Contributor address; City; State; Zip Code  Madison, WI 53704-4007	Amount of Contribution (\$)  \$18.00
Principal occupation / Job title (See Instructions) Budget Technician		Employer (See Instructions) USGS Upper Midwest Water Science Center

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 133/190 Rpt: 136/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pearl, Deborah	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>6</b> Contributor address; City; State; Zip Code  Los Angeles, CA 90068-1716		
<b>8</b> Principal occupation / Job title (See Instructions) Writer		<b>9</b> Employer (See Instructions) Self Employed
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pearson, Mary	Amount of Contribution (\$)  \$2.00
Contributor address; City; State; Zip Code  Mountain Home, AR 72653-7937		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pena, Jorge	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Wiscasset, ME 04578-4014		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Penick, Carol	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Austin, TX 78704-4004		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Austin ISD
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Penick, Carol	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Austin, TX 78704-4004		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Austin ISD



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 134/190 Rpt: 137/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/29/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Penick, Carol	<b>7</b> Amount of Contribution (\$) \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704-4004		
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) Austin ISD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perez, Miriam	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Spring, TX 77386-3242		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Peterson, Mary	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Amherst, MA 01002-1167		
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petrasso, Richard	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code  Lexington, MA 02421-4917		
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) MIT
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petri, Vernon	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code  Zionsville, IN 46077-8719		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 135/190 Rpt: 138/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/29/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pickering, Ed <hr/> <b>6</b> Contributor address; City; State; Zip Code  Ashley, OH 43003-9741	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Owner		<b>9</b> Employer (See Instructions) Pickering Dozer Services LLC
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pio, Holli <hr/> Contributor address; City; State; Zip Code  Frederick, PA 19435-9719	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Job Coach		Employer (See Instructions) Palco
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Polson, Jim <hr/> Contributor address; City; State; Zip Code  Bearsville, NY 12409-0535	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Potter, Brenda <hr/> Contributor address; City; State; Zip Code  Beverly Hills, CA 90210-3422	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Price, Denise <hr/> Contributor address; City; State; Zip Code  Bellingham, WA 98226-4251	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 136/190 Rpt: 139/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Price, Denise <hr/> <b>6</b> Contributor address; City; State; Zip Code  Bellingham, WA 98226-4251	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Primeaux, Jeffrey <hr/> Contributor address; City; State; Zip Code  Austin, TX 78748-2923	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Network Tech		Employer (See Instructions) Netsync
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Provost, Patricia <hr/> Contributor address; City; State; Zip Code  Watertown, MA 02472-2873	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Prown, Lise <hr/> Contributor address; City; State; Zip Code  Peekskill, NY 10566-3410	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pulis, Jeffrey <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76110-6624	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 137/190 Rpt: 140/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pulitzer, Jessica	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  New York, NY 10023-5967		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) NYC DSS
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pullen, Cheryl	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  Shepherdstown, WV 25443-1608		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pyatskowitz, Ruth	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  Shawano, WI 54166-3548		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pyatskowitz, Ruth	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Shawano, WI 54166-3548		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raddock, Franklin	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Stamford, CT 06905-3604		
Principal occupation / Job title (See Instructions) Health Professional		Employer (See Instructions) PsychAssociates

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 138/190 Rpt: 141/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rainbow, Luella <hr/> <b>6</b> Contributor address; City; State; Zip Code  Cocoa, FL 32926-2558	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Port Cruise Rep		<b>9</b> Employer (See Instructions) Disney
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rambow, Marilyn <hr/> Contributor address; City; State; Zip Code  Houston, TX 77081-7402	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Randall, Ron <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76133-1419	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rayner, Robin <hr/> Contributor address; City; State; Zip Code  Pflugerville, TX 78660-2571	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rayner, Robin <hr/> Contributor address; City; State; Zip Code  Pflugerville, TX 78660-2571	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 139/190 Rpt: 142/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reddy, Marcia	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Edmond, OK 73012		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Redman, Ted	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Spokane, WA 99223-8256		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Redmond, Johnny	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Arlington, MA 02474-1121		
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Tufts University
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Christine	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77096-3922		
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Susan	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Chicago, IL 60618-4910		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 140/190 Rpt: 143/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Thomas <hr/> <b>6</b> Contributor address; City; State; Zip Code  Richmond, KY 40475-1305	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Thomas <hr/> Contributor address; City; State; Zip Code  Richmond, KY 40475-1305	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Thomas <hr/> Contributor address; City; State; Zip Code  Richmond, KY 40475-1305	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reichlin, Barbara <hr/> Contributor address; City; State; Zip Code  Bellaire, TX 77401-5007	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Marital Therapist		Employer (See Instructions) Self Employed
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reilly, Sidney <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024	Amount of Contribution (\$)  \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 141/190 Rpt: 144/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reilly, Sidney	<b>7</b> Amount of Contribution (\$)  \$7.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77024		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reissman, Joan	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Austin, TX 78756-2358		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) JFYNetWorks
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Resendez, Joe	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  Houston, TX 77062-3513		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rhoden, Henry	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Austin, TX 78744-7959		
Principal occupation / Job title (See Instructions) Energy Manager		Employer (See Instructions) Harris County
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Richardson, Glenn	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  Austin, TX 78753		
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) Travis County Counseling & Education Services



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 142/190 Rpt: 145/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Richardson, Glenn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78753	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Trainer		<b>9</b> Employer (See Instructions) Travis County Counseling & Education Services
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Riley, Susan <hr/> Contributor address; City; State; Zip Code  Garland, TX 75043-5688	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) HR Specialist		Employer (See Instructions) ADP, LLC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rinn, Donna <hr/> Contributor address; City; State; Zip Code  Cedar Park, TX 78613-4838	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Risk, Nancy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78767-1591	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roach, Pam <hr/> Contributor address; City; State; Zip Code  Choctaw, OK 73020-7531	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) FEMA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 143/190 Rpt: 146/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roberts, Thomas <hr/> <b>6</b> Contributor address; City; State; Zip Code  Chapel Hill, NC 27514-5921	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Coffee Roaster		<b>9</b> Employer (See Instructions) Joe Van Gogh, Inc.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robertson, Lillie <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019-2120	Amount of Contribution (\$)  \$15,000.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Beverly <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024-6711	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Nelson <hr/> Contributor address; City; State; Zip Code  Vashon, WA 98070-4505	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Sally <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77550-5063	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) UTMB

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 144/190 Rpt: 147/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/29/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Sally	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Galveston, TX 77550-5063		
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) UTMB
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Sally	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Galveston, TX 77550-5063		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) UTMB
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Simon	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  Cedar Park, TX 78613-4821		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Pt Products And Services, Inc.
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Romero Paul, Terry	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Sherman Oaks, CA 91423-4224		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self Employed
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roos, Carolyn	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Olympia, WA 98502-4856		
Principal occupation / Job title (See Instructions) Energy Engineer		Employer (See Instructions) WSU Energy Prog

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 145/190 Rpt: 148/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roos, Carolyn	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Olympia, WA 98502-4856		
<b>8</b> Principal occupation / Job title (See Instructions) Energy Engineer		<b>9</b> Employer (See Instructions) WSU Energy Prog
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roos, Carolyn	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Olympia, WA 98502-4856		
Principal occupation / Job title (See Instructions) Energy Engineer		Employer (See Instructions) WSU Energy Prog
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roschke, Shirley	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Fresh Meadows, NY 11365-2443		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Gary	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Mission Viejo, CA 92692-2133		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Ilene	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Floral Park, NY 11005-1023		
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Hamburger Woolen Co.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 146/190 Rpt: 149/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rosenthal, Michael <hr/> <b>6</b> Contributor address; City; State; Zip Code  Claremont, CA 91711-3758	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rosmond, Polly <hr/> Contributor address; City; State; Zip Code  Olympia, WA 98512-9422	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ross, Dan <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-1452	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rotfort, Alice <hr/> Contributor address; City; State; Zip Code  Westborough, MA 01581	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rudebusch, Verne <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633-2157	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 147/190 Rpt: 150/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ruggieri, Francis <hr/> <b>6</b> Contributor address; City; State; Zip Code  Venetia, PA 15367-1222	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Human Resources		<b>9</b> Employer (See Instructions) Lucas Systems
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Russell, Virginia <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37214-2820	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ruta, George <hr/> Contributor address; City; State; Zip Code  Venice, FL 34293-2835	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan, Connie <hr/> Contributor address; City; State; Zip Code  Brightwood, OR 97011-0514	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan, Connie <hr/> Contributor address; City; State; Zip Code  Brightwood, OR 97011-0514	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 148/190 Rpt: 151/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Saal, James <hr/> <b>6</b> Contributor address; City; State; Zip Code  Brooklyn, NY 11218-5374	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sada, Beatrice <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79915-4233	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Saenz, Miguel <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78249-4269	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sallee, Barbara <hr/> Contributor address; City; State; Zip Code  Bradenton, FL 34203-7003	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Salvage, James <hr/> Contributor address; City; State; Zip Code  Orlando, FL 32812-7539	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 149/190 Rpt: 152/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Salvat, Alina <hr/> <b>6</b> Contributor address; City; State; Zip Code  Johnston, IA 50131-1606	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Interpreter		<b>9</b> Employer (See Instructions) ACELS, LLC
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Salvat, Alina <hr/> Contributor address; City; State; Zip Code  Johnston, IA 50131-1606	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Interpreter		Employer (See Instructions) ACELS, LLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sampson, David <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60653-2524	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Caregiver		Employer (See Instructions) Self Employed
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanders, Barbara <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75232-2045	Amount of Contribution (\$)  \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanders, Barbara <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75232-2045	Amount of Contribution (\$)  \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



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**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 150/190 Rpt: 153/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/29/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanders, Barbara <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75232-2045	<b>7</b> Amount of Contribution (\$)  \$6.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanders, Rachel <hr/> Contributor address; City; State; Zip Code  Brazoria, TX 77422	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sangbhgh, W. <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628-7273	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sangbhgh, W. <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78628-7273	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sartor, Thomas <hr/> Contributor address; City; State; Zip Code  Los Altos, CA 94022-3845	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Self Employed

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**SCHEDULE A1**

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<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sawtell, Cynthia <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Anselmo, CA 94960-1702	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sawyer-Cunningham, Elizabeth <hr/> Contributor address; City; State; Zip Code  Altadena, CA 91001-4130	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sbaiti, Katherine <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-3621	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) None
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schneider, John <hr/> Contributor address; City; State; Zip Code  Red Rock, TX 78662-4616	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schneider, Judith <hr/> Contributor address; City; State; Zip Code  Hewlett, NY 11557-2408	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 152/190 Rpt: 155/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schneider, Maria <hr/> <b>6</b> Contributor address; City; State; Zip Code  Laredo, TX 78045-6420	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schrick, Brad <hr/> Contributor address; City; State; Zip Code  Santa Rosa, CA 95403-1249	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seawell, Ellis <hr/> Contributor address; City; State; Zip Code  North Cape May, NJ 08204-2056	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Segrave-Daly, Elizabeth <hr/> Contributor address; City; State; Zip Code  Santa Monica, CA 90405-3004	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Senstad, Susan <hr/> Contributor address; City; State; Zip Code  Richmond, CA 94804-7424	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 153/190 Rpt: 156/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Serrero, Ginette <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbia, MD 21045-2006	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) A&G Pharmaceutical
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shafer, Elizabeth <hr/> Contributor address; City; State; Zip Code  Saugerties, NY 12477-1704	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shanklin, M. <hr/> Contributor address; City; State; Zip Code  Pearland, TX 77584-4581	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shelton, Jane <hr/> Contributor address; City; State; Zip Code  Plano, TX 75075-6238	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sheppard, Joseph <hr/> Contributor address; City; State; Zip Code  Cuero, TX 77954-0327	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 154/190 Rpt: 157/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherriff, Renee <hr/> <b>6</b> Contributor address; City; State; Zip Code  Los Angeles, CA 90016-5017	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shields, C. <hr/> Contributor address; City; State; Zip Code  Monte Alto, TX 78538-3186	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shields, C. <hr/> Contributor address; City; State; Zip Code  Monte Alto, TX 78538-3186	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Short, Sara <hr/> Contributor address; City; State; Zip Code  Lufkin, TX 75904-5314	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Showerman, Linda <hr/> Contributor address; City; State; Zip Code  Jacksonville, OR 97530-8979	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 155/190 Rpt: 158/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Siegle, Caryl	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Mansfield, TX 76063-5365		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simon, Clifford	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Englewood, NJ 07631-5121		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simon, Clifford	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Englewood, NJ 07631-5121		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simpson, Vickie	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Salem, OR 97302-3967		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simpson, Vickie	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Salem, OR 97302-3967		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 156/190 Rpt: 159/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sjoquist, Ginny <hr/> <b>6</b> Contributor address; City; State; Zip Code  Atlanta, GA 30306-3119	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Anita <hr/> Contributor address; City; State; Zip Code  Plano, TX 75023-1018	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Darial <hr/> Contributor address; City; State; Zip Code  Plano, TX 75024-7481	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Dave <hr/> Contributor address; City; State; Zip Code  Columbia, SC 29201-3066	Amount of Contribution (\$)  \$4.50
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Senior Express USA
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Dave <hr/> Contributor address; City; State; Zip Code  Columbia, SC 29201-3066	Amount of Contribution (\$)  \$4.50
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Senior Express USA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 157/190 Rpt: 160/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Donald <hr/> <b>6</b> Contributor address; City; State; Zip Code  Murfreesboro, TN 37130-5807	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith-Banks, Ida <hr/> Contributor address; City; State; Zip Code  Waco, TX 76708-1557	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smolarski, Ronald <hr/> Contributor address; City; State; Zip Code  Ann Arbor, MI 48103-3330	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Rehab Counselor		Employer (See Instructions) Beacon Rehab
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smolarski, Ronald <hr/> Contributor address; City; State; Zip Code  Ann Arbor, MI 48103-3330	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Rehab Counselor		Employer (See Instructions) Beacon Rehab
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smyth, Dennis <hr/> Contributor address; City; State; Zip Code  Washington, DC 20015-1602	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Economic Development Consultant		Employer (See Instructions) Self Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 158/190 Rpt: 161/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sneden, K.	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Lowell, MI 49331-9675	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Solis, Judith	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Lake Forest, CA 92630-7600	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sollner, Gerhard	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Lincoln, MA 01773-5014	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sorrell, Araminta	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Galveston, TX 77551-1653	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spangher, Jeffrey	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Toms River, NJ 08753-2206	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 159/190 Rpt: 162/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spiegel, Phyllis <hr/> <b>6</b> Contributor address; City; State; Zip Code  White Plains, NY 10605-3316	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Therapist		<b>9</b> Employer (See Instructions) Phyllis Spiegel
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spieler, Norman <hr/> Contributor address; City; State; Zip Code  Woodland Hills, CA 91367-7469	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Execuitive		Employer (See Instructions) NMS Property Services Corp.
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spurr, Charles <hr/> Contributor address; City; State; Zip Code  Wakefield, MA 01880-3105	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spurr, Charles <hr/> Contributor address; City; State; Zip Code  Wakefield, MA 01880-3105	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Standifer, Richard <hr/> Contributor address; City; State; Zip Code  Blanco, TX 78606-4874	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Building Contractor		Employer (See Instructions) Standifer and Assoc., Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 160/190 Rpt: 163/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Starkweather, James <hr/> <b>6</b> Contributor address; City; State; Zip Code  Sherman Oaks, CA 91411-3826	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Steiner, Fran <hr/> Contributor address; City; State; Zip Code  Laurel, MD 20709-2751	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stepczyk, Mona <hr/> Contributor address; City; State; Zip Code  Manhattan Beach, CA 90266-6642	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, John <hr/> Contributor address; City; State; Zip Code  Ypsilanti, MI 48198-2952	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stigliani Jr., Daniel <hr/> Contributor address; City; State; Zip Code  Hopewell Junction, NY 12533-5338	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 161/190 Rpt: 164/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stigliani Jr., Daniel	<b>7</b> Amount of Contribution (\$) \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Hopewell Junction, NY 12533-5338		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stigliani Jr., Daniel	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code  Hopewell Junction, NY 12533-5338		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stooksberry, Barbara	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Austin, TX 78749-2313		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stooksberry, Barbara	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Austin, TX 78749-2313		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stratton, Betty	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code  Rockford, IL 61109-1350		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 162/190 Rpt: 165/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Strickhouser, Sandra <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77062-4539	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sufian, Beverly <hr/> Contributor address; City; State; Zip Code  Houston, TX 77096-3735	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Homemkaer		Employer (See Instructions) Not Employed
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sullivan, Chris <hr/> Contributor address; City; State; Zip Code  Edmond, OK 73013-6209	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) National Sales Director		Employer (See Instructions) Simplifile
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sullivan, Jacqueline <hr/> Contributor address; City; State; Zip Code  Palmetto Bay, FL 33157-3783	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sullivan, Jacqueline <hr/> Contributor address; City; State; Zip Code  Palmetto Bay, FL 33157-3783	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 163/190 Rpt: 166/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sutton, George <hr/> <b>6</b> Contributor address; City; State; Zip Code  Nogales, AZ 85621-2449	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sutton, Pamela <hr/> Contributor address; City; State; Zip Code  Panama City, FL 32401-2519	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Stone & Sutton P.A.
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Svat, Michael <hr/> Contributor address; City; State; Zip Code  Houston, TX 77018-2037	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Videographer		Employer (See Instructions) Accelerate Learning
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Svat, Michael <hr/> Contributor address; City; State; Zip Code  Houston, TX 77018-2037	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Videographer		Employer (See Instructions) Accelerate Learning
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Syverson, Gene <hr/> Contributor address; City; State; Zip Code  Livonia, MI 48154-3898	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 164/190 Rpt: 167/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tallman, Judith <hr/> <b>6</b> Contributor address; City; State; Zip Code  North Hampton, NH 03862-0568	<b>7</b> Amount of Contribution (\$)  \$3.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tamburello, Anita <hr/> Contributor address; City; State; Zip Code  Houston, TX 77042-1201	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tamburello, Anita <hr/> Contributor address; City; State; Zip Code  Houston, TX 77042-1201	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tancin, Charlotte <hr/> Contributor address; City; State; Zip Code  Turtle Creek, PA 15145-1127	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Carnegie Mellon University
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tansill, Roy <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78418-6509	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 165/190 Rpt: 168/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tatman, Tx <hr/> <b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75082-4508	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Barbara <hr/> Contributor address; City; State; Zip Code  Knoxville, TN 37920-2893	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Carol <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-6003	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Land & Investments		Employer (See Instructions) J & C Taylor Corp
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Carol <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-6003	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Land & Investments		Employer (See Instructions) J & C Taylor Corp
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Kristen <hr/> Contributor address; City; State; Zip Code  Stuart, FL 34997-8139	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 166/190 Rpt: 169/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Leigh	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>6</b> Contributor address; City; State; Zip Code  Garland, TX 75044-2012		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Teal, Dennis	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Livingston, TX 77351-5098		
Principal occupation / Job title (See Instructions) Chiropractor		Employer (See Instructions) Self Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Teneyuca, Sharyll	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  San Antonio, TX 78201-5746		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Teranto, Christine	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Virginia Beach, VA 23456-2436		
Principal occupation / Job title (See Instructions) Marketing Manager		Employer (See Instructions) LifeNet Health
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Terry, Ian	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  Houston, TX 77003-5852		
Principal occupation / Job title (See Instructions) Senior Consultant		Employer (See Instructions) Peloton Consulting Group

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 167/190 Rpt: 170/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Joyce <hr/> <b>6</b> Contributor address; City; State; Zip Code  Oglesby, TX 76561-1528	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Testa, James <hr/> Contributor address; City; State; Zip Code  Cape May, NJ 08204-3607	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Theodorou, Anastasios <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75080-4732	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Miller Weisbrod LLP
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Deedra <hr/> Contributor address; City; State; Zip Code  Jonesboro, AR 72401-3962	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Robert <hr/> Contributor address; City; State; Zip Code  Fremont, CA 94539-6051	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 168/190 Rpt: 171/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Robert	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Fremont, CA 94539-6051		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thorstens, Pamela	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Dallas, TX 75209-5723		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tierman, Andrew	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Saginaw, MI 48603-2838		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tierman, Andrew	Amount of Contribution (\$)  \$2.00
Contributor address; City; State; Zip Code  Saginaw, MI 48603-2838		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Timko, Richard	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Kingston, PA 18704-1435		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 169/190 Rpt: 172/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Timko, Richard <hr/> <b>6</b> Contributor address; City; State; Zip Code  Kingston, PA 18704-1435	<b>7</b> Amount of Contribution (\$)  \$19.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tinguely, Tom <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2608	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Titterington, Shelley <hr/> Contributor address; City; State; Zip Code  Cedar Creek, TX 78612-4827	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Titterington, Shelley <hr/> Contributor address; City; State; Zip Code  Cedar Creek, TX 78612-4827	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Titterington, Shelley <hr/> Contributor address; City; State; Zip Code  Cedar Creek, TX 78612-4827	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 170/190 Rpt: 173/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tizard, Claire <hr/> <b>6</b> Contributor address; City; State; Zip Code  College Station, TX 77840-4843	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Toney, Trudy <hr/> Contributor address; City; State; Zip Code  Battle Ground, WA 98604-9716	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tong, Dan <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60645-2408	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Computer Consultant		Employer (See Instructions) Self Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tong, Dan <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60645-2408	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Computer Consultant		Employer (See Instructions) Self Employed
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tossman, Maribel <hr/> Contributor address; City; State; Zip Code  Cathedral City, CA 92234-2141	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 171/190 Rpt: 174/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Treloar, Sharaell <hr/> <b>6</b> Contributor address; City; State; Zip Code  New Braunfels, TX 78130-7050	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trevino, Anna <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78045	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trevino, Anna <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78045	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trillo, Brenda <hr/> Contributor address; City; State; Zip Code  Horizon City, TX 79928-6511	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions) Self Employed
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Troy, Marie <hr/> Contributor address; City; State; Zip Code  Rumford, RI 02916-1929	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 172/190 Rpt: 175/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Troyer, Beverly <hr/> <b>6</b> Contributor address; City; State; Zip Code  Churubusco, IN 46723-9100	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ungacta, Janet <hr/> Contributor address; City; State; Zip Code  Del Valle, TX 78617-5212	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van De Wege, Harley <hr/> Contributor address; City; State; Zip Code  Lakewood, CO 80227-2580	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Den Bent, Jerre <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75208-2424	Amount of Contribution (\$)  \$15,000.00
Principal occupation / Job title (See Instructions) Physical Therapist		Employer (See Instructions) Therapy 2000
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Wyk, Robert <hr/> Contributor address; City; State; Zip Code  Dorset, OH 44032-9604	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 173/190 Rpt: 176/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vanderpol, Nicole <hr/> <b>6</b> Contributor address; City; State; Zip Code  Waltham, MA 02452-8004	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Varley, John <hr/> Contributor address; City; State; Zip Code  Tucson, AZ 85711-2807	Amount of Contribution (\$)  \$12.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Varner, Artina <hr/> Contributor address; City; State; Zip Code  Desoto, TX 75115-5862	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Red Oak ISD
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Veazey, Rebecca <hr/> Contributor address; City; State; Zip Code  Port Arthur, TX 77642-0419	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Velez, Jose <hr/> Contributor address; City; State; Zip Code  Gonzales, LA 70737-8579	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 174/190 Rpt: 177/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Velnich, Doreen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Philadelphia, PA 19103-1426	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Verma, Krishan <hr/> Contributor address; City; State; Zip Code  Baytown, TX 77523-5676	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Marine Surveyor		Employer (See Instructions) Maritime Administration USDOT
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vicze, Julius <hr/> Contributor address; City; State; Zip Code  Watauga, TX 76148-1425	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vigneault, Lorrie <hr/> Contributor address; City; State; Zip Code  Hitchcock, TX 77563-2595	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Villejo, Louise <hr/> Contributor address; City; State; Zip Code  Houston, TX 77035-4936	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 175/190 Rpt: 178/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vinci, Susan	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Long Beach, NY 11561-4712		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Voege, Volker	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Bear, DE 19701-3500		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Voller, Morton	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Houston, TX 77077-5287		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vozzella, Linda	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Plano, TX 75074-2037		
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) MRMC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wagner, Bj	Amount of Contribution (\$)  \$12.50
Contributor address; City; State; Zip Code  Cape May, NJ 08204-4121		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Rutgers

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 176/190 Rpt: 179/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wagner, James	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Elverta, CA 95626-9719		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wald, Ellen	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Wyckoff, NJ 07481-1057		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walsh, Richard	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code  Grapevine, TX 76051-6334		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Kathryn	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Austin, TX 78731-4104		
Principal occupation / Job title (See Instructions) Product Management		Employer (See Instructions) Dell
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Warren, Constanca	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code  Croton On Hudson, NY 10520-3020		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 177/190 Rpt: 180/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Warren, Louise <hr/> <b>6</b> Contributor address; City; State; Zip Code  Bronx, NY 10463-2915	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Warren, Louise <hr/> Contributor address; City; State; Zip Code  Bronx, NY 10463-2915	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Warren, Louise <hr/> Contributor address; City; State; Zip Code  Bronx, NY 10463-2915	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Washington, Chris <hr/> Contributor address; City; State; Zip Code  New York, NY 10019-1140	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Wachtell Lipton Rosen & Katz
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Washington, Chris <hr/> Contributor address; City; State; Zip Code  New York, NY 10019-1140	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Wachtell Lipton Rosen & Katz

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 178/190 Rpt: 181/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Webb, Leslie	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Carmel, IN 46033-8348		
<b>8</b> Principal occupation / Job title (See Instructions) Homemaker		<b>9</b> Employer (See Instructions) None
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weekes, Earl	Amount of Contribution (\$)  \$15.00
Contributor address; City; State; Zip Code  Flushing, NY 11358-2723		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weekes, Earl	Amount of Contribution (\$)  \$15.00
Contributor address; City; State; Zip Code  Flushing, NY 11358-2723		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weening, Richard	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Marathon, TX 79842-0047		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Prolitec, Inc.
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weening, Richard	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Marathon, TX 79842-0047		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Prolitec, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 179/190 Rpt: 182/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weiner, Michael	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>6</b> Contributor address; City; State; Zip Code  McKinney, TX 75070-7030		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weiner, Michael	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  McKinney, TX 75070-7030		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weinert, Douglas	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  San Angelo, TX 76901-4978		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weinert, Douglas	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  San Angelo, TX 76901-4978		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weller, Jean	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Columbia, MD 21044-3722		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 180/190 Rpt: 183/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) West, Lois <hr/> <b>6</b> Contributor address; City; State; Zip Code  Converse, TX 78109-9700	<b>7</b> Amount of Contribution (\$)  \$2.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) West, Walter <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76109-3202	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Westberg, James <hr/> Contributor address; City; State; Zip Code  Scottsdale, AZ 85251-7907	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weynand, Diana <hr/> Contributor address; City; State; Zip Code  Woodland Hills, CA 91367-3130	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) 2nd Side Adventures, LLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) White, Steven <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75235-8742	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Inspector		Employer (See Instructions) City of Dallas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 181/190 Rpt: 184/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whitley, Tonia	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Richmond, TX 77407-4306		
<b>8</b> Principal occupation / Job title (See Instructions) Project Manager		<b>9</b> Employer (See Instructions) ACC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wiersma, Joan	Amount of Contribution (\$)  \$1.50
Contributor address; City; State; Zip Code  Bokeelia, FL 33922-2707		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wiersma, Joan	Amount of Contribution (\$)  \$2.00
Contributor address; City; State; Zip Code  Bokeelia, FL 33922-2707		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wiggins, Reynold	Amount of Contribution (\$)  \$2.50
Contributor address; City; State; Zip Code  Half Moon Bay, CA 94019-4240		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wiggins, Reynold	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Las Cruces, NM 88011-9351		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 182/190 Rpt: 185/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilcox, Joanne <hr/> <b>6</b> Contributor address; City; State; Zip Code  Madison, CT 06443-2018	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Personal Trainer		<b>9</b> Employer (See Instructions) Self Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilhelmy, Roland <hr/> Contributor address; City; State; Zip Code  Rancho Santa Fe, CA 92067-2448	Amount of Contribution (\$)  \$7.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Willars, Mario <hr/> Contributor address; City; State; Zip Code  Spring, TX 77389-4949	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Deborah <hr/> Contributor address; City; State; Zip Code  Half Moon Bay, CA 94019-1781	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Deborah <hr/> Contributor address; City; State; Zip Code  Half Moon Bay, CA 94019-1781	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 183/190 Rpt: 186/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Fred <hr/> <b>6</b> Contributor address; City; State; Zip Code  New York, NY 10018-1257	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Margaret <hr/> Contributor address; City; State; Zip Code  Black Jack, MO 63033-7219	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Patrick <hr/> Contributor address; City; State; Zip Code  Hagerstown, MD 21742-3213	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Systems Administrator		Employer (See Instructions) bylight
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Patrick <hr/> Contributor address; City; State; Zip Code  Hagerstown, MD 21742-3213	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Systems Administrator		Employer (See Instructions) bylight
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Rocque <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28278-8219	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 184/190 Rpt: 187/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Rocque	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Charlotte, NC 28278-8219		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Rocque	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Charlotte, NC 28278-8219		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Rocque	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Charlotte, NC 28278-8219		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Rocque	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Charlotte, NC 28278-8219		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Rocque	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Charlotte, NC 28278-8219		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 185/190 Rpt: 188/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Rocque <hr/> <b>6</b> Contributor address; City; State; Zip Code  Charlotte, NC 28278-8219	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Rocque <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28278-8219	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Susan <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706-7636	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Susan <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706-7636	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Tommie <hr/> Contributor address; City; State; Zip Code  Vidor, TX 77670-0421	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 186/190 Rpt: 189/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Willoughby, George <hr/> <b>6</b> Contributor address; City; State; Zip Code  Seattle, WA 98112-5028	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilson, Ken <hr/> Contributor address; City; State; Zip Code  Valley Village, CA 91607-1511	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Publicist		Employer (See Instructions) Self Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilson, Nancy <hr/> Contributor address; City; State; Zip Code  Cedar Park, TX 78613-2720	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wimberley, Kim <hr/> Contributor address; City; State; Zip Code  Bastrop, TX 78602-3993	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Del Valle ISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Winfree, Jill <hr/> Contributor address; City; State; Zip Code  Austin, TX 78752-2426	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Medical Coder		Employer (See Instructions) Banner

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 187/190 Rpt: 190/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Winter, H.	<b>7</b> Amount of Contribution (\$)  \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Alameda, CA 94501-1682	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolcott, Patricia	Amount of Contribution (\$)  \$2.00
	Contributor address; City; State; Zip Code  Bradenton, FL 34205-2524	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolcott, Patricia	Amount of Contribution (\$)  \$1.00
	Contributor address; City; State; Zip Code  Bradenton, FL 34205-2524	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wong, Hou-Hou	Amount of Contribution (\$)  \$5.00
	Contributor address; City; State; Zip Code  Conroe, TX 77385-1158	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Erin	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  Spring, TX 77381-6621	
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 188/190 Rpt: 191/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Katherine <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77024-4223	<b>7</b> Amount of Contribution (\$)  \$12.50
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Martha <hr/> Contributor address; City; State; Zip Code  Grand Prairie, TX 75050-2334	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wright & Associates
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wylie, Carolyn <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751-4405	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wylie, Carolyn <hr/> Contributor address; City; State; Zip Code  Austin, TX 78751-4405	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Young, L. <hr/> Contributor address; City; State; Zip Code  Temple, TX 76501-1566	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 189/190 Rpt: 192/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Young, Linda	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78754-5738		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zamora, Santiago	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Tomball, TX 77375-1794		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Exxon Mobil
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zeeck, Stephen	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Cedar Park, TX 78613-5374		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zimmerman, Pamela	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Santa Rosa, CA 95404-2230		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zimmerman, Pamela	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Santa Rosa, CA 95404-2230		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 190/190 Rpt: 193/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zimmerman, Pamela <hr/> <b>6</b> Contributor address; City; State; Zip Code  Santa Rosa, CA 95404-2230	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zimmerman, Pamela <hr/> Contributor address; City; State; Zip Code  Santa Rosa, CA 95404-2230	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zumwalt, Frances <hr/> Contributor address; City; State; Zip Code  El Cajon, CA 92021-3632	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Grossmont Union High School District
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zymowski, Robyn <hr/> Contributor address; City; State; Zip Code  Austin, TX 78749-3618	Amount of Contribution (\$)  \$12.50
Principal occupation / Job title (See Instructions) Mental Health Counselor		Employer (See Instructions) Self Employed

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule B: Sch: 1/1 Rpt: 194/340	
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189	
<b>4</b> TOTAL OF UNITEMIZED PLEDGES		<b>\$</b> 0.00	
<b>5</b> Date	<b>6</b> Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	<b>8</b> Amount of pledge (\$)	<b>9</b> In-kind description (If applicable)
	<b>7</b> Pledgor Address; City; State; Zip Code	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
<b>10</b> Principal occupation / Job title (See Instructions)		<b>11</b> Employer (See Instructions)	

# MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C3: Sch: 1/1 Rpt: 195/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Corporation / Labor Organization name Texas Majority	<b>6</b> Amount (\$) 8,796.50
Date 12/09/2024	Corporation / Labor Organization name Texas Majority	Amount (\$) 10,456.10
Date 12/19/2024	Corporation / Labor Organization name Texas Majority	Amount (\$) 2,500.00
Date 12/04/2024	Corporation / Labor Organization name Texas Majority	Amount (\$) 26,094.76

# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 196/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b> 0.00
<b>5</b> Date of loan	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	<b>9</b> Loan Amount (\$)
<b>6</b> Is lender a financial institution?	<b>8</b> Lender address; City; State; Zip Code	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions)		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral <input type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION <input type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/14/2024	<b>5</b> Payee name ActBlue Texas	
<b>6</b> Amount (\$) \$180.45  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/06/2024	Payee name ActBlue Texas	
Amount (\$) \$952.76  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2024	Payee name ActBlue Texas	
Amount (\$) \$12.44  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/26/2024	<b>5</b> Payee name ActBlue Texas
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<b>6</b> Amount (\$) \$2.30  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/27/2024	Payee name ActBlue Texas
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Amount (\$) \$15.57  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name ActBlue Texas
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Amount (\$) \$14.24  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/30/2024	<b>5</b> Payee name ActBlue Texas	
<b>6</b> Amount (\$) \$254.62  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2024	Payee name ActBlue Texas	
Amount (\$) \$72.52  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/30/2024	Payee name ActBlue Texas	
Amount (\$) \$116.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/11/2024	<b>5</b> Payee name ActBlue Texas	
<b>6</b> Amount (\$) \$19.94  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Allen Baca Center	
Amount (\$) \$440.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 301 W Bagdad Ave Bldg 2 Round Rock, TX 78664-6067	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Meeting Space	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting Space
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/29/2024	Payee name Amalgamated Bank	
Amount (\$) \$14.00  <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1825 K St NW  Washington, DC 20006	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Bank Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/30/2024	<b>5</b> Payee name Amalgamated Bank	
<b>6</b> Amount (\$) \$14.25	<b>7</b> Payee address; City; State; Zip Code 1825 K St NW  Washington, DC 20006	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Bank Fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/27/2024	Payee name Amalgamated Bank	
Amount (\$) \$14.50	Payee address; City; State; Zip Code 1825 K St NW  Washington, DC 20006	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Bank Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/30/2024	Payee name Amalgamated Bank	
Amount (\$) \$262.25	Payee address; City; State; Zip Code 1825 K St NW  Washington, DC 20006	
<input type="checkbox"/> Expenditure from corporate funds		
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/29/2024	<b>5</b> Payee name Amalgamated Bank	
<b>6</b> Amount (\$) \$321.25  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1825 K St NW  Washington, DC 20006	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/27/2024	Candidate/Officeholder name Payee name Amalgamated Bank	
Amount (\$) \$236.70  <input type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code 1825 K St NW  Washington, DC 20006	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/09/2024	Candidate/Officeholder name Payee name Amazon	
Amount (\$) \$552.30  <input checked="" type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name American Airlines	
<b>6</b> Amount (\$) \$427.48  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1 Skyview Dr  Fort Worth, TX 76155	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Bar Louie Round Rock	
Amount (\$) \$56.11  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 270 Bass Pro Dr  Round Rock, TX 78665-2474	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Barry's Bar and Grill	
Amount (\$) \$58.17  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 800 Convention Center Blvd  McAllen, TX 78501-0018	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Barry's Bar and Grill
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<b>6</b> Amount (\$) \$102.51	<b>7</b> Payee address; City; State; Zip Code 800 Convention Center Blvd  McAllen, TX 78501-0018
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/26/2024	Payee name Bexar County Democrats PAC
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Amount (\$) \$6,500.00	Payee address; City; State; Zip Code PO Box 12534  San Antonio, TX 78212-0534
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Expenditure from corporate funds

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/12/2024	Payee name Bexar County Democrats PAC
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Amount (\$) \$2,000.00	Payee address; City; State; Zip Code PO Box 12534  San Antonio, TX 78212-0534
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Expenditure from corporate funds

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/20/2024	<b>5</b> Payee name Bexar County Democrats PAC	
<b>6</b> Amount (\$) \$2,500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 12534  San Antonio, TX 78212-0534	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/29/2024	Payee name Bexar County Democrats PAC	
Amount (\$) \$30,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 12534  San Antonio, TX 78212-0534	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2024	Payee name Bond Collective	
Amount (\$) \$789.00  <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 310 Comal St  Austin, TX 78702-4597	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/09/2024	<b>5</b> Payee name Bond Collective
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<b>6</b> Amount (\$) \$882.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 310 Comal St  Austin, TX 78702-4597
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Brasil Caf
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Amount (\$) \$141.07  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2604 Dunlavy St  Houston, TX 77006-3702
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Breakfast Klub
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Amount (\$) \$132.07  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3711 Travis St  Houston, TX 77002-9505
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Cafe Brazil Deep Ellum	
<b>6</b> Amount (\$) \$37.93  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2815 Elm St  Dallas, TX 75226-1508	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Cafe Ion	
Amount (\$) \$39.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4201 Main St Ste 110 Houston, TX 77002-4411	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/26/2024	Payee name Cameron County Democrats PAC	
Amount (\$) \$10,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1150 N Loop 1604 W Ste 108 San Antonio, TX 78248-4504	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Canopy by Hilton San Antonio
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<b>6</b> Amount (\$) \$243.50  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 123 N Saint Marys St  San Antonio, TX 78205-2237
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/04/2024	Payee name Canva
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Amount (\$) \$36.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 200 E 6th St  Austin, TX 78701
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Canva
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Amount (\$) \$24.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 200 E 6th St  Austin, TX 78701
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/12/2024	<b>5</b> Payee name Central Texas Democrats PAC	
<b>6</b> Amount (\$) \$9,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1150 N Loop 1604 W Ste 108 San Antonio, TX 78248-4504	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/20/2024	Payee name Central Texas Democrats PAC	
Amount (\$) \$9,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1150 N Loop 1604 W Ste 108 San Antonio, TX 78248-4504	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/29/2024	Payee name Central Texas Democrats PAC	
Amount (\$) \$25,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1150 N Loop 1604 W Ste 108 San Antonio, TX 78248-4504	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Chilantro BBQ
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<b>6</b> Amount (\$) \$31.11  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1509 S Lamar Blvd  Austin, TX 78704-2965
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Conico Cocina Mexicana
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Amount (\$) \$212.99  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 610 N Mesa St  El Paso, TX 79901-1226
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/26/2024	Payee name Correa, Mayra
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Amount (\$) \$520.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8256 Easton St  Houston, TX 77017
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Per Diem
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/14/2024	<b>5</b> Payee name Correa, Mayra	
<b>6</b> Amount (\$) \$2,249.56  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 8256 Easton St  Houston, TX 77017	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/27/2024	Payee name Correa, Mayra	
Amount (\$) \$2,249.56  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8256 Easton St  Houston, TX 77017	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2024	Payee name Correa, Mayra	
Amount (\$) \$2,249.56  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8256 Easton St  Houston, TX 77017	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/26/2024	<b>5</b> Payee name Correa, Mayra	
<b>6</b> Amount (\$) \$464.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 8256 Easton St  Houston, TX 77017	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage Reimbursement
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Costco	
Amount (\$) \$27.34  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1501 W Kelly Ave  Pharr, TX 78577-5031	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Costco	
Amount (\$) \$32.69  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1501 W Kelly Ave  Pharr, TX 78577-5031	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/09/2024	<b>5</b> Payee name Costco	
<b>6</b> Amount (\$) \$120.00	<b>7</b> Payee address; City; State; Zip Code 1501 W Kelly Ave  Pharr, TX 78577-5031	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Office Supplies
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/29/2024	Payee name Dallas County Democrats PAC	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 1150 N Loop 1604 W Ste 108-230 San Antonio, TX 78248-4504	
<input type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2024	Payee name Dallas Morning News	
Amount (\$) \$32.51	Payee address; City; State; Zip Code 1954 Commerce St  Dallas, TX 75201	
<input type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 18/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Payee name Dallas Morning News	
<b>6</b> Amount (\$) \$32.51  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1954 Commerce St  Dallas, TX 75201	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/27/2024	Payee name Deckard, Danielle	
Amount (\$) \$3,153.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 23710 Thortons Park Ln  Spring, TX 78703	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2024	Payee name Deckard, Danielle	
Amount (\$) \$3,153.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 23710 Thortons Park Ln  Spring, TX 78703	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 11/19/2024	<b>5</b> Payee name Deckard, Danielle
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<b>6</b> Amount (\$) \$800.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 23710 Thortons Park Ln  Spring, TX 78703
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Per Diem
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/14/2024	Payee name Deckard, Danielle
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Amount (\$) \$3,153.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 23710 Thortons Park Ln  Spring, TX 78703
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Delta Airlines
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Amount (\$) \$198.47  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1030 Delta Blvd  Atlanta, GA 30354-1989
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Delta Airlines
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<b>6</b> Amount (\$) \$253.48  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1030 Delta Blvd  Atlanta, GA 30354-1989
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/20/2024	Payee name Digital Strategy Group
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Amount (\$) \$12,895.90  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1633 W Estes Ave Apt 4E Chicago, IL 60626-4735
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name DoubleTree Hilton
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Amount (\$) \$273.85  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 303 W. 15th Street  Austin, TX 78701
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 21/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name DoubleTree Hilton	
<b>6</b> Amount (\$) \$739.39  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 303 W. 15th Street  Austin, TX 78701	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name DoubleTree Hilton	
Amount (\$) \$1,256.92  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 303 W. 15th Street  Austin, TX 78701	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name DoubleTree Hilton	
Amount (\$) \$209.64  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 303 W. 15th Street  Austin, TX 78701	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 22/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name DoubleTree Hilton
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<b>6</b> Amount (\$) \$560.50  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 303 W. 15th Street  Austin, TX 78701
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name DoubleTree Hilton
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Amount (\$) \$646.59  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 303 W. 15th Street  Austin, TX 78701
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name El Carlos Elegante
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Amount (\$) \$320.38  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1400 N Riverfront Blvd  Dallas, TX 75207-3912
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 23/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name El Carlos Elegante	
<b>6</b> Amount (\$) \$331.71  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1400 N Riverfront Blvd  Dallas, TX 75207-3912	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/26/2024	Payee name El Paso Democratic Unity PAC	
Amount (\$) \$5,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1150 N Loop 1604 W Ste 108 San Antonio, TX 78248-4504	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/20/2024	Payee name El Paso Democratic Unity PAC	
Amount (\$) \$3,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1150 N Loop 1604 W Ste 108 San Antonio, TX 78248-4504	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 24/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 11/04/2024	<b>5</b> Payee name Elias Law Group
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<b>6</b> Amount (\$) \$7,998.50	<b>7</b> Payee address; City; State; Zip Code 250 Massachusetts Avenue NW Ste 400 Washington, DC 20001
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Legal Services	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Legal Services
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/09/2024	Payee name Elias Law Group
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Amount (\$) \$618.80	Payee address; City; State; Zip Code 250 Massachusetts Avenue NW Ste 400 Washington, DC 20001
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Legal Services	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In-Kind Contribution of Legal Services to Hidalgo County Democratic Party
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/09/2024	Payee name Elias Law Group
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Amount (\$) \$6,006.10	Payee address; City; State; Zip Code 250 Massachusetts Avenue NW Ste 400 Washington, DC 20001
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Legal Services	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Legal Services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 25/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/13/2024	<b>5</b> Payee name Embassy Suites McAllen
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<b>6</b> Amount (\$) \$1,153.48  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 800 Convention Center Blvd  McAllen, TX 78501
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/19/2024	Payee name Embassy Suites McAllen
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Amount (\$) \$921.22  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 800 Convention Center Blvd  McAllen, TX 78501
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Embassy Suites
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Amount (\$) \$171.88  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 300 S Congress Ave  Austin, TX 78704
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 26/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Embassy Suites
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<b>6</b> Amount (\$) \$544.54  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 300 S Congress Ave  Austin, TX 78704
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/13/2024	Payee name Eridef Communications
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Amount (\$) \$10,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8410 Magna St  Houston, TX 77093-7838
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Outreach Program
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/19/2024	Payee name Etheredge, Alexa
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Amount (\$) \$50.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 302 W 35th St  Austin, TX 78705
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Per Diem
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 27/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/27/2024	<b>5</b> Payee name Etheredge, Alexa	
<b>6</b> Amount (\$) \$3,477.54  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 302 W 35th St  Austin, TX 78705	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2024	Payee name Etheredge, Alexa	
Amount (\$) \$3,477.54  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 302 W 35th St  Austin, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2024	Payee name Etheredge, Alexa	
Amount (\$) \$3,477.54  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 302 W 35th St  Austin, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 28/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/09/2024	<b>5</b> Payee name Etheredge, Alexa
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<b>6</b> Amount (\$) \$100.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 302 W 35th St  Austin, TX 78705
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Per Diem
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Expedia
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Amount (\$) \$270.69  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1111 Expedia Group Way W  Seattle, WA 98119
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Expedia
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Amount (\$) \$546.38  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1111 Expedia Group Way W  Seattle, WA 98119
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 29/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Favor Delivery
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<b>6</b> Amount (\$) \$67.49  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2416 E 6th St  Austin, TX 78702-3933
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Favor Delivery
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Amount (\$) \$182.10  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2416 E 6th St  Austin, TX 78702-3933
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Favor Delivery
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Amount (\$) \$51.14  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2416 E 6th St  Austin, TX 78702-3933
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 30/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/30/2024	<b>5</b> Payee name Finn, Nohemi	
<b>6</b> Amount (\$) \$1,890.55  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 66100  Houston, TX 77266-6100	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2024	Payee name Finn, Nohemi	
Amount (\$) \$1,890.55  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 66100  Houston, TX 77266-6100	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2024	Payee name First Tuesday	
Amount (\$) \$30,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 511 Lovett Blvd  Houston, TX 77006-4020	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 31/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/05/2024	<b>5</b> Payee name First Tuesday	
<b>6</b> Amount (\$) \$10,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 511 Lovett Blvd  Houston, TX 77006-4020	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/27/2024	Payee name Fischer, Katherine	
Amount (\$) \$6,278.84  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1911 Holcombe Blvd #907 Houston, TX 77030	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Fischer, Katherine	
Amount (\$) \$6,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1911 Holcombe Blvd #907 Houston, TX 77030	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Per Diem
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 32/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 11/14/2024	<b>5</b> Payee name Fischer, Katherine
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<b>6</b> Amount (\$) \$5,875.90  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1911 Holcombe Blvd #907 Houston, TX 77030
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/30/2024	Payee name Fischer, Katherine
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Amount (\$) \$5,875.90  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1911 Holcombe Blvd #907 Houston, TX 77030
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/04/2024	Payee name Goldman-Fitzgerald LLC
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Amount (\$) \$10,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1510 Pearson St  Houston, TX 77023-3627
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 33/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/20/2024	<b>5</b> Payee name Goldman-Fitzgerald LLC	
<b>6</b> Amount (\$) \$10,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1510 Pearson St  Houston, TX 77023-3627	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Gomez, Placido	
Amount (\$) \$600.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4018 Gibson St  Houston, TX 77007	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Per Diem
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2024	Payee name Gomez, Placido	
Amount (\$) \$3,518.51  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4018 Gibson St  Houston, TX 77007	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 34/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 11/27/2024	<b>5</b> Payee name Gomez, Placido
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<b>6</b> Amount (\$) \$3,518.51  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4018 Gibson St  Houston, TX 77007
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/14/2024	Payee name Gomez, Placido
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Amount (\$) \$3,518.51  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4018 Gibson St  Houston, TX 77007
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/02/2024	Payee name Google
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Amount (\$) \$307.01  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1603 Ampitheatre Parkway  Mountain View, CA 94043
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 35/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 11/04/2024	<b>5</b> Payee name Google
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<b>6</b> Amount (\$) \$318.39  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1603 Ampitheatre Parkway  Mountain View, CA 94043
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name HG Supply and Co
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Amount (\$) \$120.55  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2008 Greenville Ave  Dallas, TX 75206-7124
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Halcyon
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Amount (\$) \$84.82  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2900 Greenville Ave  Dallas, TX 75206-6241
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 36/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Halcyon	
<b>6</b> Amount (\$) \$79.21  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2900 Greenville Ave  Dallas, TX 75206-6241	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Hawkers	
Amount (\$) \$78.55  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2800 Main St  Dallas, TX 75226-1501	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Henderson Chicken	
Amount (\$) \$48.78  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 337 E Ledbetter Dr  Dallas, TX 75216-6701	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 37/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Henry Dallas	
<b>6</b> Amount (\$) \$137.75  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2301 N Akard St Ste 250 Dallas, TX 75201	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Hertz Car Rental	
Amount (\$) \$213.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8501 Williams Rd  Esteros, FL 33928-3325	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Hertz Car Rental	
Amount (\$) \$396.79  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8501 Williams Rd  Esteros, FL 33928-3325	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 38/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/13/2024	<b>5</b> Payee name Hertz Car Rental	
<b>6</b> Amount (\$) \$243.02  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 8501 Williams Rd  Estero, FL 33928-3325	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/13/2024	Payee name Hertz Car Rental	
Amount (\$) \$74.03  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8501 Williams Rd  Estero, FL 33928-3325	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Hertz Car Rental	
Amount (\$) \$294.15  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8501 Williams Rd  Estero, FL 33928-3325	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 39/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/12/2024	<b>5</b> Payee name Hidalgo County Democratic Party
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<b>6</b> Amount (\$) \$5,500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 814 Del Oro Ln  Pharr, TX 78577-2200
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/26/2024	Payee name Hidalgo County Democratic Party
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Amount (\$) \$4,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 814 Del Oro Ln  Pharr, TX 78577-2200
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/20/2024	Payee name Hidalgo County Democratic Party
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Amount (\$) \$5,400.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 814 Del Oro Ln  Pharr, TX 78577-2200
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 40/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/29/2024	<b>5</b> Payee name Hidalgo County Democratic Party	
<b>6</b> Amount (\$) \$22,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 814 Del Oro Ln  Pharr, TX 78577-2200	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Hilton Garden Inn El Paso	
Amount (\$) \$376.12  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W University Avenue  El Paso, TX 79902	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Hilton Garden Inn El Paso	
Amount (\$) \$188.31  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W University Avenue  El Paso, TX 79902	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 41/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Hilton
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<b>6</b> Amount (\$) \$410.22  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 111 West University Ave.  El Paso, TX 79902
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Hilton
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Amount (\$) \$2,697.53  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 West University Ave.  El Paso, TX 79902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Hilton
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Amount (\$) \$1,372.02  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 West University Ave.  El Paso, TX 79902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 42/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Hilton
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<b>6</b> Amount (\$) \$523.94  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 111 West University Ave.  El Paso, TX 79902
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Hilton
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Amount (\$) \$410.68  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 West University Ave.  El Paso, TX 79902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Holiday Inn
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Amount (\$) \$628.17  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1616 Main St  Houston, TX 77002-7520
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 43/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Holiday Inn	
<b>6</b> Amount (\$) \$934.86  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1616 Main St  Houston, TX 77002-7520	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Home2 Suites McAllen	
Amount (\$) \$174.64  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 S Ware Rd  McAllen, TX 78501-8492	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Home2 Suites McAllen	
Amount (\$) \$212.27  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 S Ware Rd  McAllen, TX 78501-8492	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 44/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Home2 Suites McAllen	
<b>6</b> Amount (\$) \$594.99  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 525 S Ware Rd  McAllen, TX 78501-8492	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Home2 Suites McAllen	
Amount (\$) \$212.27  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 S Ware Rd  McAllen, TX 78501-8492	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Home2 Suites McAllen	
Amount (\$) \$1,056.77  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 S Ware Rd  McAllen, TX 78501-8492	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 45/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Home2 Suites by Hilton
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<b>6</b> Amount (\$) \$409.13  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 525 S Ware Rd  McAllen, TX 78501-8492
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/19/2024	Payee name Home2 Suites
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Amount (\$) \$1,057.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3301 Gaston Ave  Dallas, TX 75246-2014
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/19/2024	Payee name Home2 Suites
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Amount (\$) \$1,253.84  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3301 Gaston Ave  Dallas, TX 75246-2014
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 46/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Homewood Suites Dallas
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<b>6</b> Amount (\$) \$1,695.75  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1025 Elm St  Dallas, TX 75202-3113
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Homewood Suites by Hilton
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Amount (\$) \$914.01  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 15305 Dallas Pkwy  Addison, TX 75001-4637
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Homewood Suites
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Amount (\$) \$704.43  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4300 Wingren Dr  Irving, TX 75039-5566
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 47/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Homewood Suites	
<b>6</b> Amount (\$) \$718.26  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4300 Wingren Dr  Irving, TX 75039-5566	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Homewood Suites	
Amount (\$) \$2,061.62  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4300 Wingren Dr  Irving, TX 75039-5566	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Homewood Suites	
Amount (\$) \$1,933.12  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4300 Wingren Dr  Irving, TX 75039-5566	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 48/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Homewood Suites	
<b>6</b> Amount (\$) \$829.41  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4300 Wingren Dr  Irving, TX 75039-5566	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Homewood Suites	
Amount (\$) \$198.38  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4300 Wingren Dr  Irving, TX 75039-5566	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Houston Airport Reservation	
Amount (\$) \$127.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2800 N Terminal Rd  Houston, TX 77032-5569	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 49/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/31/2024	<b>5</b> Payee name Houston Chronicle	
<b>6</b> Amount (\$) \$27.72  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4747 Southwest Fwy  Houston, TX 77027	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/26/2024	Candidate/Officeholder name Houston Chronicle	
Amount (\$) \$27.72  <input type="checkbox"/> Expenditure from corporate funds	Office sought 4747 Southwest Fwy  Houston, TX 77027	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/29/2024	Candidate/Officeholder name Houston Chronicle	
Amount (\$) \$27.72  <input type="checkbox"/> Expenditure from corporate funds	Office sought 4747 Southwest Fwy  Houston, TX 77027	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 50/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 11/19/2024	<b>5</b> Payee name Hyatt Regency Houston
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<b>6</b> Amount (\$) \$1,688.94  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1200 Louisiana Street  Houston, TX 77002
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name IAH Parking
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Amount (\$) \$75.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2800 North Terminal Road  Houston, TX 77032
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name IAH Parking
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Amount (\$) \$35.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2800 North Terminal Road  Houston, TX 77032
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 51/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/13/2024	<b>5</b> Payee name IAH Parking	
<b>6</b> Amount (\$) \$23.25  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2800 North Terminal Road  Houston, TX 77032	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name IAH Parking	
Amount (\$) \$75.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2800 North Terminal Road  Houston, TX 77032	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name IAH Parking	
Amount (\$) \$150.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2800 North Terminal Road  Houston, TX 77032	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 52/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name IAH Parking
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<b>6</b> Amount (\$) \$75.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2800 North Terminal Road  Houston, TX 77032
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name IAH Parking
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Amount (\$) \$50.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2800 North Terminal Road  Houston, TX 77032
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Ikes
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Amount (\$) \$87.18  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 9828 Great Hills Trl Ste 120 Austin, TX 78759-6398
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 53/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name JW Marriott	
<b>6</b> Amount (\$) \$82.20  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 110 E 2nd St  Austin, TX 78701-4649	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Jason's Deli	
Amount (\$) \$95.04  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 9933 I-10  San Antonio, TX 78230	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Jersey Mike's	
Amount (\$) \$99.12  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7600 N 10th St Ste 800 McAllen, TX 78504-9396	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 54/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Kemuri Tatsu-ya
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<b>6</b> Amount (\$) \$265.83  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2713 E 2nd St  Austin, TX 78702-4715
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name La Concheria Cafe
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Amount (\$) \$70.36  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4120 N 23rd St  McAllen, TX 78504-4105
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name La Concheria Cafe
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Amount (\$) \$114.61  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4120 N 23rd St  McAllen, TX 78504-4105
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 55/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name La Concheria Cafe	
<b>6</b> Amount (\$) \$39.60  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4120 N 23rd St  McAllen, TX 78504-4105	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Late August Restaurant	
Amount (\$) \$43.60  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4201 Main St Ste 120 Houston, TX 77002-4411	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/22/2024	Payee name Longhorn Organizing Strategies	
Amount (\$) \$64,600.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3120 Southwest Fwy Ste 101 PMB 693824 Houston, TX 77098-4520	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvass Consulting Services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 56/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Loro Dallas	
<b>6</b> Amount (\$) \$119.09  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1812 N Haskell Ave  Dallas, TX 75204-4260	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Los Traviesos	
Amount (\$) \$52.53  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8144 Dyer St  El Paso, TX 79904	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Lyft	
Amount (\$) \$43.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 187 Berry St  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 57/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Lyft	
<b>6</b> Amount (\$) \$29.24  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 187 Berry St  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Lyft	
Amount (\$) \$26.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 187 Berry St  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Lyft	
Amount (\$) \$36.80  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 187 Berry St  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 58/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 11/19/2024	<b>5</b> Payee name Lyft
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<b>6</b> Amount (\$) \$30.29  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 187 Berry St  San Francisco, CA 94107
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/19/2024	Payee name Lyft
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Amount (\$) \$57.17  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 187 Berry St  San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/19/2024	Payee name Lyft
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Amount (\$) \$28.45  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 187 Berry St  San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 59/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/19/2024	<b>5</b> Payee name Lyft	
<b>6</b> Amount (\$) \$18.98  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 187 Berry St  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Lyft	
Amount (\$) \$15.60  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 187 Berry St  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2024	Payee name MBA Consulting Group	
Amount (\$) \$2,500.00  <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 15845  Washington, DC 20003	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Compliance Services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 60/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/09/2024	<b>5</b> Payee name MBA Consulting Group
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<b>6</b> Amount (\$) \$1,950.00	<b>7</b> Payee address; City; State; Zip Code PO Box 15845  Washington, DC 20003
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Compliance Services
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/19/2024	Payee name MBA Consulting Group
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Amount (\$) \$2,500.00	Payee address; City; State; Zip Code PO Box 15845  Washington, DC 20003
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Expenditure from corporate funds

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Compliance Services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/14/2024	Payee name Mata, Nicole
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Amount (\$) \$1,752.86	Payee address; City; State; Zip Code PO Box 66100  Houston, TX 77266-6100
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Expenditure from corporate funds

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 61/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/30/2024	<b>5</b> Payee name Mata, Nicole	
<b>6</b> Amount (\$) \$1,752.86  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 66100  Houston, TX 77266-6100	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/04/2024	Payee name Mcnaught, Kylie	
Amount (\$) \$5,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1742 1/2 W Main St  Houston, TX 77098-3608	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/04/2024	Payee name Mcnaught, Kylie	
Amount (\$) \$5,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1742 1/2 W Main St  Houston, TX 77098-3608	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 62/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Moonbeans Coffee	
<b>6</b> Amount (\$) \$73.89  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 5524 N 10th St  McAllen, TX 78504-2713	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2024	Payee name Morris, Andrea	
Amount (\$) \$4,508.90  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 987 12th Ave S  St. Petersburg, FL 33705	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Morris, Andrea	
Amount (\$) \$550.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 987 12th Ave S  St. Petersburg, FL 33705	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Per Diem
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 63/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 11/27/2024	<b>5</b> Payee name Morris, Andrea
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<b>6</b> Amount (\$) \$4,508.90  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 987 12th Ave S  St. Petersburg, FL 33705
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/14/2024	Payee name Morris, Andrea
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Amount (\$) \$4,508.90  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 987 12th Ave S  St. Petersburg, FL 33705
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name NGP VAN
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Amount (\$) \$9,713.58  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 655 15th St NW Ste 650  Washington, DC 20005
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 64/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Nixta Hospitality	
<b>6</b> Amount (\$) \$174.07  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2512 E 12th St  Austin, TX 78702-1803	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Nori Handroll Bar	
Amount (\$) \$126.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2814 Elm St  Dallas, TX 75226-1507	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/20/2024	Payee name Np Consulting Inc.	
Amount (\$) \$7,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1100 G St NW Suite 750 Washington, DC 20005-7411	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Media Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 65/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 11/14/2024	<b>5</b> Payee name Olusegun-Akinlade, Babatunde
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<b>6</b> Amount (\$) \$2,332.91  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 66100  Houston, TX 77266-6100
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/30/2024	Payee name Olusegun-Akinlade, Babatunde
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Amount (\$) \$2,332.91  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 66100  Houston, TX 77266-6100
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/27/2024	Payee name Olusegun-Akinlade, Babatunde
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Amount (\$) \$2,332.91  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 66100  Houston, TX 77266-6100
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 66/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 11/14/2024	<b>5</b> Payee name Payroll Data Processing
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<b>6</b> Amount (\$) \$11,388.20  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Payroll Taxes	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/30/2024	Payee name Payroll Data Processing
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Amount (\$) \$11,388.20  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Payroll Taxes	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/30/2024	Payee name Payroll Data Processing
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Amount (\$) \$87.47  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 67/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/27/2024	<b>5</b> Payee name Payroll Data Processing	
<b>6</b> Amount (\$) \$8,849.92  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Payroll Taxes	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2024	Payee name Payroll Data Processing	
Amount (\$) \$116.72  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/27/2024	Payee name Payroll Data Processing	
Amount (\$) \$79.22  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 68/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Payee name Politics United Marketing	
<b>6</b> Amount (\$) \$11,500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1910 Pacific Ave Ste 5095 Dallas, TX 75201	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Management Consulting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/18/2024	Payee name Politics United Marketing	
Amount (\$) \$11,939.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1910 Pacific Ave Ste 5095 Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Management Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/04/2024	Payee name Renaissance Hotels	
Amount (\$) \$651.69  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 900 E Lookout Dr  Richardson, TX 75082-4104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lodging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 69/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Roosevelt's at 7	
<b>6</b> Amount (\$) \$105.70  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 821 N Main St  McAllen, TX 78501-4324	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Savage Goods	
Amount (\$) \$65.65  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1201 N Oregon St  El Paso, TX 79902-4023	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Savage Goods	
Amount (\$) \$35.08  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1201 N Oregon St  El Paso, TX 79902-4023	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 70/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Savage Goods	
<b>6</b> Amount (\$) \$66.63  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1201 N Oregon St  El Paso, TX 79902-4023	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/31/2024	Payee name Scale to Win	
Amount (\$) \$3,164.13  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13742 Harper St  Santa Ana, CA 92703	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/04/2024	Payee name Scale to Win	
Amount (\$) \$1,284.07  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13742 Harper St  Santa Ana, CA 92703	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 71/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 11/06/2024	<b>5</b> Payee name Scale to Win
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<b>6</b> Amount (\$) \$1,516.87  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 13742 Harper St  Santa Ana, CA 92703
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting Services
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/04/2024	Payee name Scale to Win
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Amount (\$) \$2,718.07  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13742 Harper St  Santa Ana, CA 92703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting Services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/07/2024	Payee name Scale to Win
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Amount (\$) \$2,141.52  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13742 Harper St  Santa Ana, CA 92703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting Services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 72/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 11/05/2024	<b>5</b> Payee name Scale to Win
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<b>6</b> Amount (\$) \$1,637.48  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 13742 Harper St  Santa Ana, CA 92703
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting Services
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/31/2024	Payee name Scale to Win
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Amount (\$) \$2,370.01  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13742 Harper St  Santa Ana, CA 92703
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting Services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/28/2024	Payee name Scale to Win
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Amount (\$) \$1,887.25  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13742 Harper St  Santa Ana, CA 92703
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting Services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 73/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 10/30/2024	<b>5</b> Payee name Scale to Win
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<b>6</b> Amount (\$) \$2,643.89  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 13742 Harper St  Santa Ana, CA 92703
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting Services
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/07/2024	Payee name Scale to Win
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Amount (\$) \$2,496.02  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13742 Harper St  Santa Ana, CA 92703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting Services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/02/2024	Payee name Slack
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Amount (\$) \$118.16  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 Howard St  San Francisco, CA 94105-3000
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 74/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/04/2024	<b>5</b> Payee name Slack	
<b>6</b> Amount (\$) \$139.01  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 500 Howard St  San Francisco, CA 94105-3000	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2024	Payee name Southwest Airlines	
Amount (\$) \$645.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2702 Lovefiled Dr  Dallas, TX 75235	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Southwest Airlines	
Amount (\$) \$276.98  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2702 Lovefiled Dr  Dallas, TX 75235	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 75/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Southwest Airlines
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<b>6</b> Amount (\$) \$656.97  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2702 Lovefiled Dr  Dallas, TX 75235
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Taconeta
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Amount (\$) \$34.43  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 311 Montana Ave  El Paso, TX 79902-5210
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Taconeta
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Amount (\$) \$47.74  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 311 Montana Ave  El Paso, TX 79902-5210
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 76/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/09/2024	<b>5</b> Payee name Target
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<b>6</b> Amount (\$) \$40.04	<b>7</b> Payee address; City; State; Zip Code 7400 N 10th St  McAllen, TX 78504
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Office Supplies
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/04/2024	Payee name The Bonner Group
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Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 800 Maine Ave SW Ste 450 Washington, DC 20024-2805
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Expenditure from corporate funds

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/09/2024	Payee name The Common Desk
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Amount (\$) \$5,721.91	Payee address; City; State; Zip Code 2339 Commerce St  Houston, TX 77002-2319
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Expenditure from corporate funds

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Rent
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 77/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/09/2024	<b>5</b> Payee name The Common Desk
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<b>6</b> Amount (\$) \$4,721.91	<b>7</b> Payee address; City; State; Zip Code 2339 Commerce St  Houston, TX 77002-2319
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Rent
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/09/2024	Payee name The Common Desk
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Amount (\$) \$5,038.43	Payee address; City; State; Zip Code 2339 Commerce St  Houston, TX 77002-2319
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Rent
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/09/2024	Payee name The Common Desk
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Amount (\$) \$4,721.91	Payee address; City; State; Zip Code 2339 Commerce St  Houston, TX 77002-2319
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Rent
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 78/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189			
<b>4</b> Date 12/09/2024	<b>5</b> Payee name The Common Desk				
<b>6</b> Amount (\$) \$4,761.53	<b>7</b> Payee address; City; State; Zip Code 2339 Commerce St  Houston, TX 77002-2319				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Rent			
	<table style="width:100%; border: none;"> <tr> <td style="width:25%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border: none;">Candidate/Officeholder name</td> <td style="width:25%; border: none;">Office sought</td> <td style="width:20%; border: none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 11/04/2024	Payee name The Texas Tribune				
Amount (\$) \$41.21	Payee address; City; State; Zip Code 919 Congress Ave 6th Fl  Austin, TX 78701				
<input type="checkbox"/> Expenditure from corporate funds					
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription			
	<table style="width:100%; border: none;"> <tr> <td style="width:25%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border: none;">Candidate/Officeholder name</td> <td style="width:25%; border: none;">Office sought</td> <td style="width:20%; border: none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 12/02/2024	Payee name The Texas Tribune				
Amount (\$) \$41.21	Payee address; City; State; Zip Code 919 Congress Ave 6th Fl  Austin, TX 78701				
<input type="checkbox"/> Expenditure from corporate funds					
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription			
	<table style="width:100%; border: none;"> <tr> <td style="width:25%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:50%; border: none;">Candidate/Officeholder name</td> <td style="width:25%; border: none;">Office sought</td> <td style="width:20%; border: none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 79/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 11/19/2024	<b>5</b> Payee name Thomas, Kelly
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<b>6</b> Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 7133 N Mesa St Apt 62  El Paso, TX 79912
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Fee
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/09/2024	Payee name Thomas, Kelly
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Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7133 N Mesa St Apt 62  El Paso, TX 79912
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Tiny Champions
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Amount (\$) \$281.13  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2617 McKinney St  Houston, TX 77003-3727
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 80/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Tower Dallas	
<b>6</b> Amount (\$) \$217.36  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1601 Elm St FI 48 Dallas, TX 75201-4701	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2024	Payee name USPS	
Amount (\$) \$10.60  <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1500 Hadley St  Houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Postage & Shipping
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber Eats	
Amount (\$) \$95.38  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1515 3rd St  San Francisco, CA 94158-2211	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 81/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber Eats	
<b>6</b> Amount (\$) \$82.22  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1515 3rd St  San Francisco, CA 94158-2211	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber Eats	
Amount (\$) \$97.45  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1515 3rd St  San Francisco, CA 94158-2211	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber Eats	
Amount (\$) \$75.68  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1515 3rd St  San Francisco, CA 94158-2211	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 82/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber Eats
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<b>6</b> Amount (\$) \$58.54  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1515 3rd St  San Francisco, CA 94158-2211
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber Eats
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Amount (\$) \$79.84  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1515 3rd St  San Francisco, CA 94158-2211
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber Eats
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Amount (\$) \$69.27  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1515 3rd St  San Francisco, CA 94158-2211
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 83/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber Eats
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<b>6</b> Amount (\$) \$161.91  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1515 3rd St  San Francisco, CA 94158-2211
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber Eats
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Amount (\$) \$42.06  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1515 3rd St  San Francisco, CA 94158-2211
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber Eats
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Amount (\$) \$147.99  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1515 3rd St  San Francisco, CA 94158-2211
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 84/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$28.23  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$23.29  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$65.59  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 85/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$54.69  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$13.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$17.63  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 86/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$67.42  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$24.17  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$29.90  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 87/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$45.19  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$17.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$25.45  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 88/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$40.34  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$17.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$92.84  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 89/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$10.18  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$14.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 90/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$25.77  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$10.24  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$62.47  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 91/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$41.07  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$18.13  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$13.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 92/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$24.81  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$19.29  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$37.06  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 93/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$19.54  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$24.76  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$15.64  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 94/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$5.43  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$10.63  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$19.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 95/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$3.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$63.57  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$67.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 96/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$11.84  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$7.88  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$6.90  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 97/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$63.57  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$62.47  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$26.10  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 98/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$50.24  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$65.59  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$3.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 99/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/19/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$71.26  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$19.33  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$19.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 100/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$38.20  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$39.42  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$24.88  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 101/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$13.20  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/19/2024	Payee name Uber
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Amount (\$) \$49.45  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$54.49  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 102/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$14.06  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Uber	
Amount (\$) \$20.92  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Uber	
Amount (\$) \$9.70  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 103/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$30.64  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$50.94  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$7.64  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 104/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$10.37  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$21.72  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$28.25  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 105/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$6.63  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$15.24  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$23.47  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 106/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$31.61	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$55.95	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$9.99	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 107/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$25.45  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Uber	
Amount (\$) \$51.20  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$21.37  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 108/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$59.23  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$17.53  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$8.83  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 109/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$67.14  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$5.86  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$62.80  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 110/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$5.04  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$61.12  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$45.19  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 111/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$4.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$74.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 112/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$12.64	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$26.10	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$25.22	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 113/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$43.22  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$43.22  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 114/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$12.90  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$40.03  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$44.40  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 115/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$12.53  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$136.13  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 116/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$94.38  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$16.33  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$63.64  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 117/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$9.99  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$30.44  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$15.21  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 118/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$10.23  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$32.08  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$21.12  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 119/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$4.69  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$20.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$43.86  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 120/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$31.84  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$36.78  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$4.22  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 121/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$18.48  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$3.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$29.88  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 122/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$43.63  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$10.11  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$29.88  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 123/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$17.08  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$22.24  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uber	
Amount (\$) \$44.17  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 124/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Uber
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<b>6</b> Amount (\$) \$92.84	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$4.30	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Uber
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Amount (\$) \$24.22	Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 125/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/19/2024	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) \$21.97  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 3rd St  San Francisco, CA 94518	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Uchiba Dallas	
Amount (\$) \$226.73  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2817 Maple Ave FI 2 Dallas, TX 75201-1403	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name United Airlines	
Amount (\$) \$80.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 126/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name United Airlines
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<b>6</b> Amount (\$) \$363.48  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name United Airlines
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Amount (\$) \$427.97  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name United Airlines
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Amount (\$) \$352.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 127/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name United Airlines	
<b>6</b> Amount (\$) \$44.74  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name United Airlines	
Amount (\$) \$458.47  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name United Airlines	
Amount (\$) \$278.57  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 128/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 11/19/2024	<b>5</b> Payee name United Airlines
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<b>6</b> Amount (\$) \$227.48  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name United Airlines
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Amount (\$) \$51.31  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/13/2024	Payee name United Airlines
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Amount (\$) \$459.17  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 129/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name United Airlines
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<b>6</b> Amount (\$) \$480.95  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name United Airlines
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Amount (\$) \$282.47  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name United Airlines
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Amount (\$) \$44.74  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 130/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name United Airlines	
<b>6</b> Amount (\$) \$366.95  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name United Airlines	
Amount (\$) \$317.92  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name United Airlines	
Amount (\$) \$578.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 131/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name United Airlines
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<b>6</b> Amount (\$) \$308.48  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name United Airlines
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Amount (\$) \$312.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/19/2024	Payee name United Airlines
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Amount (\$) \$352.59  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 132/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name United Airlines	
<b>6</b> Amount (\$) \$492.96  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name United Airlines	
Amount (\$) \$1,291.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name United Airlines	
Amount (\$) \$360.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 133/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name United Airlines
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<b>6</b> Amount (\$) \$164.47  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/13/2024	Payee name United Airlines
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Amount (\$) \$483.34  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name United Airlines
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Amount (\$) \$125.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 134/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name United Airlines
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<b>6</b> Amount (\$) \$275.48  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 609 Main St  Houston, TX 77002
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/11/2024	Payee name United Healthcare
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Amount (\$) \$6,829.26  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 1459  Minneapolis, MN 55440
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Health Insurance Premium
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/13/2024	Payee name United Healthcare
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Amount (\$) \$8,452.18  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 1459  Minneapolis, MN 55440
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Health Insurance Premium
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 135/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Vonlane
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<b>6</b> Amount (\$) \$280.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Vonlane
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Amount (\$) \$270.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Vonlane
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Amount (\$) \$280.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 136/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Vonlane	
<b>6</b> Amount (\$) \$135.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Vonlane	
Amount (\$) \$10.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Vonlane	
Amount (\$) \$145.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 137/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/13/2024	<b>5</b> Payee name Vonlane
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<b>6</b> Amount (\$) \$270.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Vonlane
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Amount (\$) \$125.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Vonlane
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Amount (\$) \$115.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 138/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Vonlane	
<b>6</b> Amount (\$) \$135.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Vonlane	
Amount (\$) \$270.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Vonlane	
Amount (\$) \$260.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 139/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 12/04/2024	<b>5</b> Payee name Vonlane	
<b>6</b> Amount (\$) \$280.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Vonlane	
Amount (\$) \$135.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Vonlane	
Amount (\$) \$145.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 140/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Vonlane
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<b>6</b> Amount (\$) \$280.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Vonlane
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Amount (\$) \$135.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Vonlane
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Amount (\$) \$145.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3802 Maple Avenue Suite 267 Dallas, TX 75219
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 141/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/04/2024	<b>5</b> Payee name Waxy O'Connors
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<b>6</b> Amount (\$) \$59.42	<b>7</b> Payee address; City; State; Zip Code 234 Riverwalk  San Antonio, TX 78205-2224
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/09/2024	Payee name YourMembership.com
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Amount (\$) \$124.00	Payee address; City; State; Zip Code 9620 Executive Center Dr N #200 St. Petersburg, FL 33702
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Expenditure from corporate funds

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Software Subscription
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/14/2024	Payee name Zamorano, Javier
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Amount (\$) \$1,890.55	Payee address; City; State; Zip Code 20783 Carlos St  San Benito, TX 78586-6753
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Expenditure from corporate funds

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 142/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 10/30/2024	<b>5</b> Payee name Zamorano, Javier	
<b>6</b> Amount (\$) \$1,890.55  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 20783 Carlos St  San Benito, TX 78586-6753	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Zermeno, Crystal	
Amount (\$) \$18,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2894 Delaware St  Oakland, CA 94602	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Management Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Zoom	
Amount (\$) \$84.59  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd  San Jose, CA 95113	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 143/143 Rpt:	<b>2</b> FILER NAME Texas Majority PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00087189
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<b>4</b> Date 12/09/2024	<b>5</b> Payee name Zoom
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<b>6</b> Amount (\$) \$282.13	<b>7</b> Payee address; City; State; Zip Code 55 Almaden Blvd San Jose, CA 95113
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non-Contribution Account: Software Subscription
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name la Concheria Cafe
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Amount (\$) \$92.66	Payee address; City; State; Zip Code 4120 N 23rd St McAllen, TX 78504-4105
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Expenditure from corporate funds

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meal
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 1/1 Rpt: 340/340
<b>2</b> FILER NAME Texas Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00087189
<b>4</b> Date 11/13/2024	<b>5</b> Name of person from whom amount is received Eridef Communications	<b>8</b> Amount (\$) \$9,975.00
	<b>6</b> Address of person from whom amount is received; City; State; Zip Code  Houston, TX 77093	
	<b>7</b> Purpose for which amount is received ACH Return <input type="checkbox"/> Check if political contribution returned to filer	
<b>Date</b> 10/27/2024	<b>Name of person from whom amount is received</b> Harris County Democratic Party	<b>Amount (\$)</b> \$5,000.00
	<b>Address of person from whom amount is received; City; State; Zip Code</b>  Houston, TX 77020	
	<b>Purpose for which amount is received</b> Voided Check <input checked="" type="checkbox"/> Check if political contribution returned to filer	