

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00082825	2 Total pages filed: 116
3 COMMITTEE NAME Pflugerville Area Democrats		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 01/15/2025	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO BOX 2655 Pflugerville, TX 78691-2655	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Mr. Jonathan <hr/> NICKNAME LAST SUFFIX Coffman	
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE PO Box 2655 Pflugerville, TX 78691	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 2655 Pflugerville, TX 78691	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (816) 807-1365	
9 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff	
10 PERIOD COVERED		Month Day Year Month Day Year 07/01/2024 THROUGH 12/31/2024	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 11/04/2024 <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Pflugerville Area Democrats	13 Filer ID (Ethics Commission Filers) 00082825
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Jim McDonald City council
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,303.24
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,439.35
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 14,474.73
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 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.

Mr. Jonathan Coffman

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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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12 COMMITTEE NAME Pflugerville Area Democrats		13 Filer ID (Ethics Commission Filers) 00082825
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported James Talarico State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Katherine Culbert Railroad Commissioner B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Jose Garza District Attorney

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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12 COMMITTEE NAME Pflugerville Area Democrats		13 Filer ID (Ethics Commission Filers) 00082825
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Maggie Ellis Court Of Appeals, Justice B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Chari Kelly Court Of Appeals, Justice B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Karin Crump Court Of Appeals, Justice B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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12 COMMITTEE NAME Pflugerville Area Democrats		13 Filer ID (Ethics Commission Filers) 00082825
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Jeff Travillion County Commissioner
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Nick Chu County Probate court B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Kimberly Holiday City Council B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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12 COMMITTEE NAME Pflugerville Area Democrats	13 Filer ID (Ethics Commission Filers) 00082825
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Sarah Eckhardt State Senator	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Sheryl Cole State Senator	

SUBTOTALS - GPAC

17 COMMITTEE NAME Pflugerville Area Democrats		18 Filer ID 00082825	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	10,303.24
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
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 type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$	
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 type="checkbox"/> SCHEDULE E: LOANS	\$	
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	5,439.35
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/102 Rpt: 8/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Curtis	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Joyce	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Afzal, Shanna	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Medical lab scientist		Employer (See Instructions) Labcorp
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguirre, Marsha	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Austin, TX 78728		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert, Jonathan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Medical Assistant		Employer (See Instructions) Baylor Scott and White

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/102 Rpt: 9/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albrecht, Stephanie <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almaguer, Gladys <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almaguer, Gladys <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almaguer, Gladys <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almaguer, Gladys <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/102 Rpt: 10/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almaguer, Gladys <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almaguer, Gladys <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Becky <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OT		Employer (See Instructions) Cantex
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angele, Leo <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) ERCOT
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atherton, Allison <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Management		Employer (See Instructions) Sonic Healthcare

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/102 Rpt: 11/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Deborah <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Texas Court of Criminal Appeals
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Deborah <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Texas Court of Criminal Appeals
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Deborah <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Texas Court of Criminal Appeals
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Nancy <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Azurin, Dana <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Arrow Electronics

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/102 Rpt: 12/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Azurin, Dana <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Arrow Electronics
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Christine <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Teacher Retirement System
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banks, Phyllis <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Jennifer <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Marketing Analyst		Employer (See Instructions) Yodle
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Jennifer <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/102 Rpt: 13/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barquet, Tammy <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) I BM
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Jeffrie <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Freight Operations		Employer (See Instructions) Arrive Logistics
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Jeffrie <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Freight Operations		Employer (See Instructions) Arrive Logistics
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beasley, Vicki <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaulne, Justin <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Senior Software Engineer		Employer (See Instructions) Procore Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/102 Rpt: 14/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benoit, Michelle <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) <div style="text-align: right;">\$10.00</div>
8 Principal occupation / Job title (See Instructions) Editor		9 Employer (See Instructions) Texas AM
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Jean <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) <div style="text-align: right;">\$20.00</div>
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Roslyn Public Schools
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Jean <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) <div style="text-align: right;">\$20.00</div>
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Roslyn Public Schools
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Jean <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) <div style="text-align: right;">\$20.00</div>
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Roslyn Public Schools
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Jean <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) <div style="text-align: right;">\$20.00</div>
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Roslyn Public Schools

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/102 Rpt: 15/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Jean <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Roslyn Public Schools
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Jean <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Roslyn Public Schools
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blache, Paige <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Academic Research administration		Employer (See Instructions) UT Austin
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumberg, Ilene <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) social worker		Employer (See Instructions) County
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonner, Aneeshah <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Associate Management		Employer (See Instructions) Accenture

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/102 Rpt: 16/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brahli, Gary <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248	7 Amount of Contribution (\$) \$233.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bredt, Laura <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Nurse education		Employer (See Instructions) Concordia
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Roxanne <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briscese, Maria <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briscese, Maria <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/102 Rpt: 17/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briscese, Maria	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Unemployed		9 Employer (See Instructions) none
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briscese, Maria	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) none
Date 07/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Debi	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Debi	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Debi	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/102 Rpt: 18/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Debi <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Debi <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
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#: _____) Bryant, Debi <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bumpass, Rebecca <hr/> Contributor address; City; State; Zip Code Austin, TX 78723-2515	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Betty <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/102 Rpt: 19/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, Dannielle <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Sub		9 Employer (See Instructions) Pfisd
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cannon, Rodrick <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-5167	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Training Development Manager		Employer (See Instructions) Texas Military Department
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantrelle, Dianna <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) RRISD
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Laura <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caperton, Cecil <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/102 Rpt: 20/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carey, Michael	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlin, Stella	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Letter carrier		Employer (See Instructions) USPS
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Michael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casanova, Silvia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660-8948		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casbeer, Ernie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78691		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Austin Community College

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/102 Rpt: 21/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casbeer, Ernie	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78691		
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions) Austin Community College
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casbeer, Ernie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78691		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Austin Community College
Date 10/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casbeer, Ernie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78691		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Austin Community College
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casbeer, Ernie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78691		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Austin Community College
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casbeer, Ernie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78691		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Austin Community College

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/102 Rpt: 22/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Celly, Laura	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Tamy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) not stated
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Tamy	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) ACC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheatum, Tammy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Taylor, TX 76574		
Principal occupation / Job title (See Instructions) Planning		Employer (See Instructions) Microchip
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheatum, Tammy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Taylor, TX 76574		
Principal occupation / Job title (See Instructions) Planning		Employer (See Instructions) Microchip

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/102 Rpt: 23/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christie, LeeAnn	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) Dell Children s Medical Center
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clemens, Deanna	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) State agency		Employer (See Instructions) TEA
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, Amy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Amy Cobb Consulting
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffman, Jonathan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Senior Manager		Employer (See Instructions) ServiceNow
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Mindy	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/102 Rpt: 24/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Camille	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) Austin Public Health
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Camille	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78752		
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) St Davids
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Mary Ann	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coonen, Rachel	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Sales Director		Employer (See Instructions) TIDI Products
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppedge, Donna	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/102 Rpt: 25/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Costantino, Marie <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660-3483	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Costantino, Marie <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-3483	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotten, Deborah <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	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#: _____) Craven, Wesley <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Simpson Strong-Tie
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crocker, Mark <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Application Specialist		Employer (See Instructions) Hometap

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/102 Rpt: 26/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crocker, Mark <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Application Specialist		9 Employer (See Instructions) Hometap
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croteau, Rosanne <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Pfid
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Christina <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PFISD
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Dale <hr/> Contributor address; City; State; Zip Code Pflugeville, TX 78660	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Sarah <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) PFISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/102 Rpt: 27/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 07/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Janice <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) Firstcare Health Plan
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Janice <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Firstcare Health Plan
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Janice <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-2408	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Analysts		Employer (See Instructions) Baylor Scott and White
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Janice <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Firstcare Health Plan
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Janice <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Firstcare Health Plan

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/102 Rpt: 28/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Janice	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) Firstcare Health Plan
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Janice	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Firstcare Health Plan
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Rachael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Rachael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Rachael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/102 Rpt: 29/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Rachael	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Rachael	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Rachael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Rachael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
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#: _____) Davis, Rachael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/102 Rpt: 30/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De La Cruz-Blackard, Lorena <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Demel, Mara <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Dance Instructor		Employer (See Instructions) Mara Tyrone
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denson, Jane <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sr Admin Assoc		Employer (See Instructions) University of Texas at Austin
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denson, Jane <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Finance Manager		Employer (See Instructions) University of Texas
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denson, Jane <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sr Admin Assoc		Employer (See Instructions) University of Texas at Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/102 Rpt: 31/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denson, Jane	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Finance Manager		9 Employer (See Instructions) University of Texas at Austin
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denson, Jane	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Finance Manager		Employer (See Instructions) University of Texas at Austin
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denson, Jane	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Sr Admin Assoc		Employer (See Instructions) University of Texas at Austin
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denson, Jane	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Sr Admin Assoc		Employer (See Instructions) University of Texas at Austin
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deshotel, Kari	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/102 Rpt: 32/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Adriana <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Nancy <hr/> Contributor address; City; State; Zip Code pflugerville, TX 78660-3864	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Service Lloyds
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doseck, Monica <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) FedEx Office
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durham, Richard <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) HEB Grocery
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durham, Richard <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) HEB Grocery

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/102 Rpt: 33/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durham, Richard	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Austin, TX 78753	
8 Principal occupation / Job title (See Instructions) Cashier		9 Employer (See Instructions) HEB Grocery
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durham, Richard	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78753	
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) HEB Grocery
Date 10/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durham, Richard	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78753	
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) HEB Grocery
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durham, Richard	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78753	
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) HEB Grocery
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durham, Richard	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78753	
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) HEB Grocery

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/102 Rpt: 34/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E. Thaxton, Patricia <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Communications		9 Employer (See Instructions) State of Texas
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebbighausen, Laurie <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Hutto ISD
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Deanna <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	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#: _____) Edwards, Deanna <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elkins, Michelle <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Child Support Officer		Employer (See Instructions) Texas OAG

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/102 Rpt: 35/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Joshua	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Hutto ISD
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Maggie	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Austin, TX 78731	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Travis County
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engelke, Doris	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engelke, Karin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Report Specialist		Employer (See Instructions) Medical Equation
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engelke, Karin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Report Specialist		Employer (See Instructions) Medical Equation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/102 Rpt: 36/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epstein, Pat	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epstein, Pat	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epstein, Pat	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epstein, Pat	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epstein, Pat	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/102 Rpt: 37/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epstein, Pat <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epstein, Pat <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
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#: _____) Epstein, Pat <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ertresvaag, Scott <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Director of Events		Employer (See Instructions) Dell Medical School
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Gary <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/102 Rpt: 38/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Kathryn <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660-2734	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferley, Cynthia <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) UT Austin
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) UT Austin
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) UT Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/102 Rpt: 39/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) UT Austin
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Carol <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) UT Austin
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, James <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, James <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, James <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/102 Rpt: 40/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, James	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, James	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
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#: _____) Fletcher, James	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Christine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Round Rock, TX 78664		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Austin ISD
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaston, Keith	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660-4528		
Principal occupation / Job title (See Instructions) Consulting Technical Manager		Employer (See Instructions) Oracle

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/102 Rpt: 41/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 07/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gernale, Charmaine	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Austin, TX 78754		
8 Principal occupation / Job title (See Instructions) Data analyst		9 Employer (See Instructions) TX Workforce Commission
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gernale, Charmaine	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78754		
Principal occupation / Job title (See Instructions) Data analyst		Employer (See Instructions) TX Workforce Commission
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gernale, Charmaine	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78754		
Principal occupation / Job title (See Instructions) Data analyst		Employer (See Instructions) TX Workforce Commission
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gernale, Charmaine	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78754		
Principal occupation / Job title (See Instructions) Data analyst		Employer (See Instructions) TX Workforce Commission
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gernale, Charmaine	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78754		
Principal occupation / Job title (See Instructions) Data analyst		Employer (See Instructions) TX Workforce Commission

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/102 Rpt: 42/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gernale, Charmaine	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Austin, TX 78754		
8 Principal occupation / Job title (See Instructions) Data analyst		9 Employer (See Instructions) TX Workforce Commission
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert, Kim	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Pfsid
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Rosa	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) KCI
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Victor	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Victor	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/102 Rpt: 43/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Victor	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) ODP
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Victor	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Victor	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
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#: _____) Gonzales, Victor	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
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#: _____) Gonzales, Victor	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/102 Rpt: 44/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, William <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Calibration Technician		9 Employer (See Instructions) Tescom
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, William <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Calibration Technician		Employer (See Instructions) Tescom
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, William <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Calibration Technician		Employer (See Instructions) Tescom
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Jennifer <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Information Governance		Employer (See Instructions) ERCOT
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gribbin burket, Ryan <hr/> Contributor address; City; State; Zip Code Mastic, NY 11950	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilson Sonsini

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/102 Rpt: 45/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gribbin burket, Ryan	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Mastic, NY 11950		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Wilson Sonsini
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gribbin burket, Ryan	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Mastic, NY 11950		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilson Sonsini
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gribbin burket, Ryan	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Mastic, NY 11950		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilson Sonsini
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gribbin burket, Ryan	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Mastic, NY 11950		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilson Sonsini
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gribbin burket, Ryan	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Mastic, NY 11950		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilson Sonsini

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/102 Rpt: 46/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Holly <hr/> 6 Contributor address; City; State; Zip Code pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Learning and development		9 Employer (See Instructions) Texas HHSC
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffis, Sonya <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Letter carrier		Employer (See Instructions) USPS
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimmer, Sarah <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Chase Bank
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gupta, Shivani <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Half
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guyden, Jerry and Linda <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/102 Rpt: 47/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haak, Leslie	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Admin		9 Employer (See Instructions) Lochner
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Christine	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Leslie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660-7810		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Leslie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660-7810		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrell, Stacy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Event planner		Employer (See Instructions) Eclipse Event Co

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/102 Rpt: 48/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Dana <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) PflSD
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hattersley, Craig <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	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#: _____) Hayes, Holly <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) proposal manager		Employer (See Instructions) ea engineering science and technology Inc pbc
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, Rebecca <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Scott <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) DevOps Engineer		Employer (See Instructions) Blockchain Game Partners

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/102 Rpt: 49/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Scott	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Security Engineer		9 Employer (See Instructions) Blockchain Game Partners
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Scott	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) DevOps Engineer		Employer (See Instructions) Blockchain Game Partners
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Scott	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) DevOps Engineer		Employer (See Instructions) Blockchain Game Partners
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Scott	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) DevOps Engineer		Employer (See Instructions) Blockchain Game Partners
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Scott	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) DevOps Engineer		Employer (See Instructions) Blockchain Game Partners

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/102 Rpt: 50/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Scott	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) DevOps Engineer		9 Employer (See Instructions) Blockchain Game Partners
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Skye Teagan	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660-7965		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Crunchtime
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensley, KC	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Food manufacturer		Employer (See Instructions) Self
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hissam, Timothy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Tax Examining Tech		Employer (See Instructions) IRS
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hissam, Timothy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Tax Examining Tech		Employer (See Instructions) IRS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/102 Rpt: 51/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hisssam, Timothy <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Tax Examining Tech		9 Employer (See Instructions) IRS
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hisssam, Timothy <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Tax Examining Tech		Employer (See Instructions) IRS
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hitchcock, Erik <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-7561	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hitchcock, Erik <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-7561	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hitchcock, Erik <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-7561	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/102 Rpt: 52/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hitchcock, Erik <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hitchcock, Erik <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-7561	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#: _____) Hitchcock, Erik <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-7561	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#: _____) Hitchcock, Erik <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-7561	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, Janet <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) DSHS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/102 Rpt: 53/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoke, Alileah	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Therapist		9 Employer (See Instructions) Pflugerville Counseling Center
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holloway, Danielle	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Administrative		Employer (See Instructions) City of Austin
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston, Darryl	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston, Darryl	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston, Darryl	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/102 Rpt: 54/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston, Darryl <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston, Darryl <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
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#: _____) Houston, Darryl <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Louise <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Ascension
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hull, Megan <hr/> Contributor address; City; State; Zip Code Washington, DC 20007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Activist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/102 Rpt: 55/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hull, Susan <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurtado, Audree <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Registered nurse		Employer (See Instructions) St Davids
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRVIN, STEVEN <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-1621	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Cloud AI Executive		Employer (See Instructions) IBM
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irvin, Steven <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Cloud AI Executive		Employer (See Instructions) IBM
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JORDAN <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Retro Studios

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/102 Rpt: 56/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaimes, Judid	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Finance		9 Employer (See Instructions) Finance
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Jane	Amount of Contribution (\$) \$5.50
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Jane	Amount of Contribution (\$) \$5.50
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Jane	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Jane	Amount of Contribution (\$) \$5.50
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/102 Rpt: 57/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Jane <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$5.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Jane <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.50
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#: _____) Jensen, Jane <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kelsey <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LCSW-S		Employer (See Instructions) Integral Care
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johst, Chevonne <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/102 Rpt: 58/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johst, Chevonne	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Self
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johst, Chevonne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johst, Chevonne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johst, Chevonne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johst, Chevonne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/102 Rpt: 59/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, DaSean <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Donald <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Billing Adm Asst.		Employer (See Instructions) Signature Healthcare
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katauskas, Stephanie <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Trevor <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Patient care coordinator		Employer (See Instructions) UHC
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall, Rene <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/102 Rpt: 60/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kihlstrom, April	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knighton, Terry	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knighton, Terry	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knighton, Terry	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knighton, Terry	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/102 Rpt: 61/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knighton, Terry	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knighton, Terry	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knighton, Terry	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knutson, Asher	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78729		
Principal occupation / Job title (See Instructions) Admin		Employer (See Instructions) UR
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kosater, Austin	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions) Apple

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/102 Rpt: 62/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kotrla, Dow	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Halcyon Home Health
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kotrla, Dow	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) LVN		Employer (See Instructions) Encompass Health Home Health
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kwon, Zeenatroohi	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Training supervisor		Employer (See Instructions) Austin Police Department
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Sandi Lane	Amount of Contribution (\$) \$13.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Round Rock Rec Center
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Sandra	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Round Rock

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/102 Rpt: 63/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larkin, Beverly Jean <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Business Analyst		9 Employer (See Instructions) State of Texas
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laurence, Linda <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-4751	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Markel
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Robin <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Seton
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Robin <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Seton
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Dorothy <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/102 Rpt: 64/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewin, Katie <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Therapist/social worker		Employer (See Instructions) Televero Health
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lexine Hebson, Ciera <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Activities Assistant		Employer (See Instructions) Maravilla at the Domain
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindow, Doris <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linsalata, Joe <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/102 Rpt: 65/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linsalata, Vicky <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78728	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockhart, Lolly <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockhart, Lolly <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockhart, Lolly <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockhart, Lolly <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/102 Rpt: 66/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockhart, Lolly	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockhart, Lolly	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockwood, Beverly	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luper, Maria del Rocio	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Insurance LSP		Employer (See Instructions) Nelson Robinson Agency
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luper, Maria del Rocio	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Insurance LSP		Employer (See Instructions) Nelson Robinson Agency

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/102 Rpt: 67/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marek, Helen Mary <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Graphic Designer		9 Employer (See Instructions) TFI
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Michael <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MaryAnn, mary ann <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mascorro, Sally <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Executive assistant		Employer (See Instructions) StudioSIX5
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCall, Rosie T <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/102 Rpt: 68/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCollough, Colleen <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Social worker		9 Employer (See Instructions) Integral Care
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Jim <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Certified Advanced Mediator		Employer (See Instructions) self
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Jim <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Certified Advanced Mediator		Employer (See Instructions) self
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Jim <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Certified Advanced Mediator		Employer (See Instructions) self
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLean, Leslie <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Special Education Behavior Specialist		Employer (See Instructions) PflSD

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/102 Rpt: 69/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcginnis, Robin <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Dentist		9 Employer (See Instructions) Communicare
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mebane-Sims, Irma <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, Cindy <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Compliance		Employer (See Instructions) Private
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metayer, Rudolph <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Graves Dougherty
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minor, Melissa <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Specialists		Employer (See Instructions) Tea

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/102 Rpt: 70/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Margaret	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) NXP Semiconductor
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montoya, Elizabeth	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montoya, Elizabeth	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Cpa		Employer (See Instructions) Self
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, MLiss	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, MLiss	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/102 Rpt: 71/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murdock, Janet <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash, Kirsten <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-3611	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PFISD
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Negrete, Tracy <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Dell Technologies
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nino, Jeremy <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Principal Architect		Employer (See Instructions) Contender Solutions
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolde, Kahlyne <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Lone Star Circle of Care

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/102 Rpt: 72/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolde, Kahlyne	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660-8112		
8 Principal occupation / Job title (See Instructions) LCSW		9 Employer (See Instructions) Lone Star Circle of Care
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolde, Kahlyne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Lone Star Circle of Care
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolde, Kahlyne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Lone Star Circle of Care
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolde, Kahlyne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Lone Star Circle of Care
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolde, Kahlyne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Lone Star Circle of Care

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/102 Rpt: 73/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolde, Kahlyne <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Therapist		9 Employer (See Instructions) Lone Star Circle of Care
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nunez, Maria <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Supervisor		Employer (See Instructions) Call center
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ochsner, David <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) QA Engineer		Employer (See Instructions) barbri
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ochsner, Kim <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) Resource specialist		Employer (See Instructions) American Cancer Society
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ochsner, Kim <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Patient Resource Specialist		Employer (See Instructions) American Cancer Society

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/102 Rpt: 74/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ochsner, Kim <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Patient Resource Specialist		9 Employer (See Instructions) American Cancer Society
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Okafor, Alexander <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Okafor, Alexander <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Okafor, Alexander <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Okafor, Alexander <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/102 Rpt: 75/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Okafor, Alexander	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Okafor, Alexander	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Papovich, Casey	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) astronomer		Employer (See Instructions) Texas AM University
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Papovich, Casey	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) astronomer		Employer (See Instructions) Texas AM University
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Papovich, Casey	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) astronomer		Employer (See Instructions) Texas AM University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/102 Rpt: 76/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Papovich, Casey	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) astronomer		9 Employer (See Instructions) Texas AM University
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Papovich, Casey	Amount of Contribution (\$) \$22.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) astronomer		Employer (See Instructions) Texas AM University
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Papovich, Casey	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) astronomer		Employer (See Instructions) Texas AM University
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Papovich, Casey	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) astronomer		Employer (See Instructions) Texas AM University
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Papovich, Maureen	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Singer		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/102 Rpt: 77/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Papovich, Maureen <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) singer/voice teacher		9 Employer (See Instructions) self
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Manisha <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Clinical Care Coordinator		Employer (See Instructions) Optum
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Milton <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) PflISD
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perrino, Erin <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Library associate		Employer (See Instructions) Pflugerville isd
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Kristin <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Patent paralegal		Employer (See Instructions) Mitsubishi

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/102 Rpt: 78/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierrottie, Amy	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660-7631		
8 Principal occupation / Job title (See Instructions) Parent Educator		9 Employer (See Instructions) Travis County
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierson, Susan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-4609		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierson, Susan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierson, Susan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-4609		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierson, Susan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/102 Rpt: 79/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierson, Susan <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-4609	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierson, Susan <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierson, Susan <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-4609	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierson, Susan <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
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#: _____) Pierson, Susan <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-4609	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/102 Rpt: 80/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierson, Susan	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierson, Susan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-4609		
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#: _____) Pierson, Susan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plock, August	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) PFISD
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plock, August	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) PFISD

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/102 Rpt: 81/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plock, August	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions) PFISD
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plock, August	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) PFISD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plock, August	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) PFISD
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plock, August	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) PFISD
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pomar, Ana	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Retiree

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/102 Rpt: 82/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Posada, Jacqueline <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) UT Dell Med
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quiroz, Joan <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDALL, JESSE <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) vp		Employer (See Instructions) National Field netwprk
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, JEFFREY <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramin, Lindsey <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/102 Rpt: 83/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rayner, Rob <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rayner, Rob <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rayner, Rob <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Read, Lindsey <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Imagine Learning
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Read, Lindsey <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Imagine Learning

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/102 Rpt: 84/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Repich, Deanne <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Head of School		9 Employer (See Instructions) Great Minds Learning Community
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rios, Rachel <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Impact Counseling
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rips, Geoff <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, James <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Quality Inspector		Employer (See Instructions) Samsung Austin Semiconductor
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Marsha <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/102 Rpt: 85/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roessler, Darla	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rollman, Cheryl	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Data analyst		Employer (See Instructions) Texas
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romero, Rhys	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Oxford Global Resources
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosas, Adrian	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roth, Melissa	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Organizing Life Coach		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/102 Rpt: 86/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rouda, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Social worker		9 Employer (See Instructions) Aspen Healthcare
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudolph, Pat <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-4890	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Melody <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rydolph, Kennard <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Austin ISD
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWITZER, MARY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/102 Rpt: 87/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Hayden	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Letter Carrier		9 Employer (See Instructions) USPS
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schnabel, Mark	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schnell, Christina	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Landlord		Employer (See Instructions) Self employed
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, John	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) College professor		Employer (See Instructions) UT Austin
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, John	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Prof		Employer (See Instructions) It austin

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/102 Rpt: 88/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seligman, Karen <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Senn, Jannell <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinclair, Kanika <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Substitute Teacher		Employer (See Instructions) Pfsid
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slack, Emma <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) Veterinary Emergency Group
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soifer, Jan <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/102 Rpt: 89/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steber, Stephanie	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Susan	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Susan	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Susan	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Susan	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/102 Rpt: 90/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokely, Jessica <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sylvester, Debra <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanaka, Robert <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanwar, Kaira <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$110.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Texas Society of CPAs
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Cynthia <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-2725	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Investigator		Employer (See Instructions) Cynthia Taylor

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/102 Rpt: 91/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 07/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Holly	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Austin, TX 78751		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Travis County
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Holly	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660-5790		
Principal occupation / Job title (See Instructions) editor		Employer (See Instructions) University of Texas
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Matthew	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Account Executive		Employer (See Instructions) Heinemann
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Stanley	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teitelman, A C	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/102 Rpt: 92/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teitelman, A C	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teitelman, A C	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teitelman, A C	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
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#: _____) Teitelman, A C	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
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#: _____) Teitelman, A C	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/102 Rpt: 93/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Julie <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Julie <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Julie <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-5019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Julie <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Julie <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/102 Rpt: 94/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Julie	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Allison	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Allison	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Allison	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Allison	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/102 Rpt: 95/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Allison	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Allison	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
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#: _____) Thompson, Allison	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
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#: _____) Thompson, Allison	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, Susan	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/102 Rpt: 96/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorman, Tiffany <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) School for the blind
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorman, Tiffany <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) school for the blind
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorman, Tiffany <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) School for the blind
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorman, Tiffany <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Tx school for the blind
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorman, Tiffany <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) School for the blind

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/102 Rpt: 97/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorman, Tiffany <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) Tx school for the blind
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorman, Tiffany <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) School for the blind
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorman, Tiffany <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) School for the blind
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorman, Tiffany <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) School for the blind
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tobias, Eduardo <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Video Producer		Employer (See Instructions) TCEQ

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/102 Rpt: 98/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tobias, Eduardo <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Video Producer		9 Employer (See Instructions) TCEQ
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tolan, Victorina <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Diane <hr/> Contributor address; City; State; Zip Code Arlington, TX 76017	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Independent Life Insurance Agent		Employer (See Instructions) Self
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Lorenzo <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023-3612	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NICE Systems
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Richard <hr/> Contributor address; City; State; Zip Code Pfulgerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/102 Rpt: 99/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Richard	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Richard	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Richard	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Richard	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
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#: _____) Torres, Richard	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/102 Rpt: 100/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Richard <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres-Yanez, Claudia <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) NerdWallet
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tovar, Iran <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) UT Austin
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Towery, Kendra <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PFISD
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Travillion, Jeffrey <hr/> Contributor address; City; State; Zip Code Austin, TX 78768	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Commissioner		Employer (See Instructions) Travis County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/102 Rpt: 101/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trovall, Carl	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Concordia University TX
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trovall, Carol	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Concordia University Texas
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tubbs, Laura	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Progressive Insurance
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, EVELYN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vandenberg, Brenda	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/102 Rpt: 102/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vidauri, Bernadino	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vitrano, Jenn	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walter, Kathleen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wangerin, Luke	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PFISD
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wardlock, Bryttne	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Tech support		Employer (See Instructions) Office Practicum

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/102 Rpt: 103/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Audrey <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) communications coordinator		9 Employer (See Instructions) The University of Texas at Austin
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Audrey <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) communications coordinator		Employer (See Instructions) The University of Texas at Austin
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Audrey <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) communications coordinator		Employer (See Instructions) The University of Texas at Austin
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wehner, Mark <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welker, Erin <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Enablement Specialist		Employer (See Instructions) Procore Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/102 Rpt: 104/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Debbie <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Vicki <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Vicki <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Vicki <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winocour, Kelsey <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) KWC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/102 Rpt: 105/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolff, Lacy <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Wellness Coordinator		9 Employer (See Instructions) ERS
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Word, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HR Consultant		Employer (See Instructions) Self Employed
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Word, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HR Consultant		Employer (See Instructions) Self Employed
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Carol <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanez, Claudia <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) SunPower

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/102 Rpt: 106/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanez, Claudia <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) HR		9 Employer (See Instructions) SunPower
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanez, Claudia <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) SunPower
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanez, Claudia <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) SunPower
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanez, Claudia <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) SunPower
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanez, Claudia <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) SunPower

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/102 Rpt: 107/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanta, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanta, Jennifer <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanta, Jennifer <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanta, Jennifer <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanta, Jennifer <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/102 Rpt: 108/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanta, Jennifer	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanta, Jennifer	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Wendy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Emerson
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Margaret	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Substitute teacher		Employer (See Instructions) PfISD
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) free, charles	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) RoadVantage

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/102 Rpt: 109/116
2 FILER NAME Pflugerville Area Democrats		3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ramsey, kenneth <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) reha, gloria <hr/> Contributor address; City; State; Zip Code pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) storey, kristen <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales manager		Employer (See Instructions) Tiktok
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) young, joshua <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) administration		Employer (See Instructions) Wellmed

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.

1 Total pages Schedule F1: Sch: 1/7 Rpt: 110/116	2 FILER NAME Pflugerville Area Democrats	3 Filer ID (Ethics Commission Filers) 00082825
4 Date 07/16/2024	5 Payee name Amazon	
6 Amount (\$) \$168.69 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 410 Terry Ave Seattle, WA 98109	
8 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 Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2024	Payee name Amazon	
Amount (\$) \$45.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 411 Terry Ave Seattle, WA 98109	
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 Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/24/2024	Payee name Amazon	
Amount (\$) \$54.11 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 411 Terry Ave Seattle, WA 98109	
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 Office Supplies
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.

1 Total pages Schedule F1: Sch: 2/7 Rpt: 111/116	2 FILER NAME Pflugerville Area Democrats	3 Filer ID (Ethics Commission Filers) 00082825
4 Date 10/22/2024	5 Payee name Epstein, Pat	
6 Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 603 Princeton Dr Pflugerville, TX 78660	
8 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 Stamps
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/28/2024	Candidate/Officeholder name Etsy Inc	
Amount (\$) \$5.63 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/12/2024	Candidate/Officeholder name Etsy Inc	
Amount (\$) \$86.55 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 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.

1 Total pages Schedule F1: Sch: 3/7 Rpt: 112/116	2 FILER NAME Pflugerville Area Democrats	3 Filer ID (Ethics Commission Filers) 00082825
4 Date 07/30/2024	5 Payee name Henderson, Scott	
6 Amount (\$) \$20.56 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 20213 Hidden Gully Ln Pflugerville, TX 78660	
8 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 Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/30/2024	Payee name Henderson, Scott	
Amount (\$) \$199.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 20213 Hidden Gully Ln Pflugerville, TX 78660	
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 Voter Reg Event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/30/2024	Payee name Henderson, Scott	
Amount (\$) \$903.89 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 20213 Hidden Gully Ln Pflugerville, TX 78660	
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 Voter Reg Event
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.

1 Total pages Schedule F1: Sch: 4/7 Rpt: 113/116	2 FILER NAME Pflugerville Area Democrats	3 Filer ID (Ethics Commission Filers) 00082825
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4 Date 09/26/2024	5 Payee name Henderson, Scott
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6 Amount (\$) \$493.89 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 20213 Hidden Gully Ln Pflugerville, TX 78660
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Signs
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/26/2024	Payee name Henderson, Scott
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Amount (\$) \$582.31 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 20213 Hidden Gully Ln Pflugerville, TX 78660
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Picnic Supplies
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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 10/22/2024	Payee name Henderson, Scott
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Amount (\$) \$999.93 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 20213 Hidden Gully Ln Pflugerville, TX 78660
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Postcards
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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.

1 Total pages Schedule F1: Sch: 5/7 Rpt: 114/116	2 FILER NAME Pflugerville Area Democrats	3 Filer ID (Ethics Commission Filers) 00082825
4 Date 08/18/2024	5 Payee name Meta Advertising	
6 Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Meta platform digital ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/18/2024	Payee name Meta Advertising	
Amount (\$) \$97.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Meta platform digital ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/18/2024	Payee name Meta Advertising	
Amount (\$) \$479.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code One Hacker Way Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Meta platform digital ads
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.

1 Total pages Schedule F1: Sch: 6/7 Rpt: 115/116	2 FILER NAME Pflugerville Area Democrats	3 Filer ID (Ethics Commission Filers) 00082825
4 Date 07/14/2024	5 Payee name OPAVote	
6 Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 440 N Brranca Ave Covina, CA 91723	
8 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 Membership Voting Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/13/2024	Payee name Office Depot	
Amount (\$) \$17.67 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 19000 Limestone Commercial Dr Suite 500 Pflugerville, TX 78660	
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 Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/10/2024	Payee name Pflugerville Pride	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 88 Pflugerville, TX 78691	
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 Event Sponsorship
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.

1 Total pages Schedule F1: Sch: 7/7 Rpt: 116/116	2 FILER NAME Pflugerville Area Democrats	3 Filer ID (Ethics Commission Filers) 00082825
4 Date 09/05/2024	5 Payee name Worley Printing Company	
6 Amount (\$) \$124.04 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3217 N I35 Frontage Austin, TX 78722	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Signs
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Office held		