CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	Filer ID (Eth	ics Commission Filers)	2 Total pages filed:				OFFICE U	SE ONLY
	00081605		199				Date Received	
3	CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Nathan M.			MI	ELECTRONICAI 02/03/2025	LLY FILED
		NICKNAME	LAST			SUFFIX		
			Johnson		_		Date Hand-delivered or I	Date Postmarked
4	ORIGINAL REPORT TYPE	\times January 15	Runoff		Other (sp	pecify)	Descript //	Americant
		July 15 30th day before election	Exceeded modified				Receipt #	Amount
			Final Report (Attach	holder only)			Date Processed	
-		8th day before election		,	Dav	Voor		
5	ORIGINAL PERIOD COVERED	Month Day Year 07/01/2024	THROUGH	Month	Day 1/2024	Year	Date Imaged	
6	EXPLANATION OF (12/0	1/2024			
	This report is being a	mended to include an in-kind	d contribution made in	the report p	eriod.			
7	AFFIDAVIT		l sw	ear, or affirm	, under pe	enalty of perjury	y, that this corrected	report is true
				correct.	ext to any	and all annlica	ble statements:	
					to any	and an applica	ble statements.	
			X	was made i	n good fa	ith and without	affirm that the origin an intent to mislead ned in the report.	
			X	report not la that the rep	ater than t ort as orig ffirm, that	he 14th busine ginally filed is ir any error or or	that I am filing this c iss day after the date naccurate or incomple nission in the report a	e I learned ete. I
					The Ho	norable Nath	an M. Johnson	
					Signatu	re of Candidate	e or Officeholder	
	AFFIX NOTARY ST	AMP / SEAL ABOVE						
	Sworn to and subso	ribed before me, by the said				, this t	he	day
		, 20, to certii						
	Signature of offic	er administering oath	Printed name of of	ficer adminis	tering oat	h ·	Title of officer admini	stering oath
		Remember To Atta Need	ach Any Part Of led To Report A				ort Form	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commi 00081605	ssion Filers)	 Total pages file 19 	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		
OFFICEHOLDER	The Honorable	Nathan M.			OFFICE U	SE UNLY
NAME	The Honorable	Natian ivi.			Date Received	
					ELECTRONICA	LLY FILED
	NICKNAME	LAST		SUFFIX	02/03/2025	
	NENNAME			30111X		
		Johnson				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	⁻ Y;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER	P.O. Box 670994					
MAILING ADDRESS					Receipt #	Amount
Change of Address	Dallas, TX 75367-0994				Date Processed	
					Date Imaged	
					Date mageu	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
5 CAMPAIGN TREASURER				IVII		
NAME	Mrs.	Sharon				
	NICKNAME	LAST		SUFFIX		
	-	Young				
		roung				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP	r / SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	8333 Douglas Avenue					
	Ste. 900					
(Residence or Business)						
	Dallas, TX 75225					
			EXTENSION			
7 CAMPAIGN TREASURER		IE NUMBER	EXTENSION			
PHONE	(214) 855-2942					
8 REPORT					_	
TYPE	X January 15	30th day before	e election	Runoff	15th day after cam	
		-			appointment (office	
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Attac	ch C/OH-FR)
				roporting inne		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2024	Tł	HROUGH	12/31/2024	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		Primary	Runoff	Other	
	11/05/2024		linitary			
	11/03/2024		General	Special		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)	
	State Senator District 16			State Senator Dis		
	State Senator District 10			State Seriator Dis		
	-			-		
		GO	FO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.u	S	Versio	n V4.1.0.5dd2ace2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 3 of 199

13 C / OH NAME	Johnson, Nathan M. (The Honorable)	14 Filer ID (E 00081605	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without t I officeholders are required to report this information	he candidate's or officel	nolder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Texas REALTORS PAC		
		COMMITTEE ADDRESS		
	SPECIFIC	1115 San Jacino Blvd		
		Ste 200		
		Austin, TX 78701		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Cantu, Leslie		
		COMMITTEE CAMPAIGN TREASURER ADDRES	S	
		PO Box 2246		
		Austin, TX 78768		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	i)	\$ 348,722.43
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 5,078.14
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 257,674.63
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L/ RIOD	AST DAY OF THE	\$ 503,700.77
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT	•			•
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		The Honora	ble Nathan M. Johns	on
		Signature of	Candidate or Officehold	er
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subs	cribed before me, by the s	aid	this the	day
		ertify which, witness my hand and seal of office.	, and and	(00)
Signature of offic	cer administering	Printed name of officer administering	Title of officer	administering oath
Forms provided by Te	xas Ethics Commission	www.ethics.state.tx.us	V	ersion V4.1.0.5dd2ace2

FORM C/OH COVER SHEET PG 3 4 of 199

19 Filer ID 00081605	(Ethics C	ommission Filers)
	SUB	TOTAL AMOUNT
	\$	345,987.50
	\$	2,734.93
	\$	
	\$	
٩S	\$	251,973.32
	\$	
IONS	\$	
	\$	5,449.43
	\$	251.88
S OF C/OH	\$	
IONS	\$	
RETURNED	\$	
		00081605 SUB SUB SUB SUB SUB SUB SUB SUB

SUBTOTALS - C/OH

SCHEDULE	A1
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	The Instru	ction Guide explains how to com	plete this for	rm.	1	Total pages Schedule A1: Sch: 1/120 Rpt: 5/199	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Johnson, Na	than M. (The Honorable)				00081605	
4	Date	· ·	state PAC (ID#: CO)0040279)	7	Amount of Contribution (\$)	
	11/20/2024	Abbott Laboratories Employee Polit				-	\$750.00
		6 Contributor address; City; State; Zip Co					
		Abbott Park, IL 60064-3502					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
Γ	Date	Full name of contributor out-of-s	state PAC (ID#:)		Amount of Contribution (\$)	
	12/13/2024	Ablon, Baron					\$30.00
		Contributor address; City; State; Zip Co	ode				
		Dallas, TX 75204-1560					
		pation / Job title (See Instructions)		Employer (See Instructions)		
	Owner			Soil Building Systems			
Γ	Date		state PAC (ID#:)		Amount of Contribution (\$)	
	10/12/2024	Abtahi, Bobby					\$250.00
		Contributor address; City; State; Zip Co	ode				
		Dollag, TX 75202 1210					
	Dringinglaggy	Dallas, TX 75203-1310		Frankryer (Cas hastryetions			
	Attorney	pation / Job title (See Instructions)		Employer (See Instructions Self employed)		
	Date		state PAC (ID#:)		Amount of Contribution (\$)	#0 500 00
	12/14/2024	Acosta, Arcilia					\$2,500.00
		Contributor address; City; State; Zip Co	ode				
		Dallas, TX 75247-5207					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u>		
	CEO/Preside			CARCON Industries & C		struction	
⊢				、			
	Date 07/23/2024		state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	0112312024	Adamczyk, Matthew					Ψ20.00
		Contributor address; City; State; Zip Co	Jue				
		Dallas, TX 75248-1452					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Not Employe			Not Employed	,		
\vdash		<u> </u>	I				

The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/120 Rpt: 6/199	
2 FILER NAME Johnson, Na	athan M. (The Honorable)		3	Filer ID (Ethics Commission 00081605	on Filers)
4 Date 10/25/2024			7	Amount of Contribution (\$)	\$10.00
	6 Contributor address; City; State; Zip Code		•		
	San Antonio, TX 78213-3706				
8 Principal occu Not Employe	upation / Job title (See Instructions) ed	9 Employer (See Instructions Not Employed	3)		
Date 08/14/2024	Aksoy, Darlene)		Amount of Contribution (\$)	\$10.00
-	Coppell, TX 75019-5311 upation / Job title (See Instructions)	Employer (See Instructions	5)		
Not Employe	3d	Not Employed	_		
Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:_ Alist Consulting LLC)		Amount of Contribution (\$)	\$250.00
	Contributor address; City; State; Zip Code Austin, TX 78757-3209				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Date 09/17/2024	Full name of contributor out-of-state PAC (ID#: Allred, David Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Dallas, TX 75231-4830				
Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	3)		
Date 12/13/2024	Full name of contributor x out-of-state PAC (ID#: American Express PAC	200040535)		Amount of Contribution (\$)	\$2,000.00
	Washington, DC 20004-2673				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		

SCHEDULE	A1
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	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 3/120 Rpt: 7/199	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Johnson, Na	than M. (The Honorable)				00081605	,
4	Date	5 Full name of contributor	X out-of-state PAC (ID#: CO) 00066472	7	Amount of Contribution (\$)	
	12/13/2024	American Property Casua	Ity Insurance Association	on PAC			\$1,000.00
		6 Contributor address; City; Sta	ate; Zip Code				
		Chicago, IL 60631-3512					
8	Principal occu	pation / Job title (See Instructions))	9 Employer (See Instructions	5)		
	Date	Full name of contributor	X out-of-state PAC (ID#: CO	00251876)		Amount of Contribution (\$)	
	12/13/2024	Amgen Inc Political Action	Committee				\$1,000.00
		Contributor address; City; St	ate; Zip Code				
		Thousand Oaks, CA 9132	0-1730				
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	5)		
Γ	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/21/2024	Apache Corporation Politio	cal Action Committee				\$1,000.00
		Contributor address; City; Sta	ate; Zip Code				
		Houston, TX 77056-4497					
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/15/2024	Apartment Association of	Greater Dallas PAC				\$1,000.00
		Contributor address; City; St	ate; Zip Code				
		Dallas, TX 75240-6337					
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/27/2024	Appel, Robert L.					\$5,000.00
		Contributor address; City; Sta	ate; Zip Code				
		Dallas, TX 75225-4850					
		pation / Job title (See Instructions))	Employer (See Instructions	5)		
	Not employe	d		Not employed			
1							

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 4/120 Rpt: 8/199	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	athan M. (The Honorable)		00081605	. ,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7 Amount of Contribution (\$)	
11/27/2024	Associations Inc PAC			\$2,500.00
	6 Contributor address; City; State; Zip Code			
	Dallas, TX 75205-3348			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	
12/14/2024	Atkins, James			\$10.00
	Contributor address; City; State; Zip Code			
	Dallas TV 75252 6026			
Drincinal occu	Dallas, TX 75252-6836	Employer (See Instructions)	\	
Not Employe	upation / Job title (See Instructions) ed	Not Employed)	
			Amount of Contribution (¢)	
Date 12/13/2024	Full name of contributor out-of-state PAC (ID#: Atmos Energy Corporation PAC)	Amount of Contribution (\$)	\$3,000.00
12/13/2024				დ ა,000.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75240-2630			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	
07/21/2024	Avey, Melinda			\$50.00
	Contributor address; City; State; Zip Code			
D in single and	Round Rock, TX 78664-9618		L	
Principal occu Not Employe	upation / Job title (See Instructions)	Employer (See Instructions) Not Employed)	
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	<u>ቀ100 00</u>
10/19/2024	Avey, Melinda			\$100.00
	Contributor address; City; State; Zip Code			
	Round Rock, TX 78664-9618			
Principal occl	I upation / Job title (See Instructions)	Employer (See Instructions))	
Not Employe		Not Employed		
		_1		

Johnson, Nathan M. (The Honorable) 00081605 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) 07/03/2024 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (\$) \$10 6 Contributor address; City; State; Zip Code Manchaca, TX 78652-3037 9 Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$100 12/14/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$100 12/14/2024 Babb, Daniel Contributor address; City; State; Zip Code Amount of Contribution (\$) \$100 Og/12/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$250 Og/12/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$250 Og/12/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$250 Og/12/2024 Full name of contributor out-of-state PAC (ID#:)	The Instruction Cuide explains how to complete this form. Sch: 5/120 Rpt: 9/199 2 Filer ID CEINCAL 3 Johnson, Nathan M. (The Honorable) 3 Filer ID CEINCAL 07/03/2024 Full name of contributor out-of-state PAC (ID#) 7 Amount of Contribution (S) Full name of contributor address; City; State; Zip Code 7 Amount of Contribution (S) 8 Principal occupation / Job title (See Instructions) Not Employed Not Employed Amount of Contribution (S) 12/14/2024 Full name of contributor out-of-state PAC (ID# Amount of Contribution (S) 12/14/2024 Full name of contributor out-of-state PAC (ID# Amount of Contribution (S) 12/14/2024 Full name of contributor out-of-state PAC (ID# Amount of Contribution (S) 10/2/12/2024 Full name of contributor out-of-state PAC (ID# Amount of Contribution (S) 09/12/2024 Full name of contributor out-of-state PAC (ID# Amount of Contribution (S) 09/12/2024 Full name of contributor out-of-state PAC (ID# Amount of Contribution (S) 10/20/2024 Full name of contrib				
Johnson, Nuthan M. (The Honorable) 00081605 4 Date 07/03/2024 5 Full name of contributor	Johnson, Nathan M. (The Honorable) 00081605 4 Date 07/03/2024 Full name of contributor Ayres, Jonathan out-of-state PAC (ID# 7 Amount of Contribution (\$) \$10,00 6 Contributor address; City; State: Zip Code Manchaca, TX 78652-3037 9 Employer (See Instructions) Not Employed Amount of Contribution (\$) \$10,00 8 Principal occupation / Job title (See Instructions) Not Employed P Employer (See Instructions) Not Employed Amount of Contribution (\$) \$100,00 Date 12/14/2024 Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) \$100,00 7 Principal occupation / Job title (See Instructions) Account Manager Employer (See Instructions) Microsoft Amount of Contribution (\$) \$250,00 9 Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) \$250,00 9 Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) \$250,00 0a/12/2024 Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) \$250,00 0ate 0ate Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) \$250,00 10/20/2024 Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) \$250,00 10/20/2	The Ins	ruction Guide explains how to complete this f	form.	
Johnson, Nation M. (The Honorable) 00081605 4 Date \$ Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) 07/03/2024 \$ Contributor address; City; State; Zip Code Manchaca, TX 78652-3037 7 Amount of Contribution (\$) 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$100 12/14/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$100 09/12/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$100 09/12/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$250 09/12/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$250 09/12/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$250 09/12/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contributi	Johnson, Natham M. (The Honorable) 00081605 4 Date 07/03/2024 5 Full name of contributor Ayres, Jonathan 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (\$) \$10.00 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Amount of Contribution (\$) \$100.00 Date 12/14/2024 Full name of contributor Babb, Daniel Contributor address; City; State; Zip Code Amount of Contribution (\$) \$100.00 Date 12/14/2024 Full name of contributor Babb, Daniel Contributor address; City; State; Zip Code Amount of Contribution (\$) \$100.00 Date 12/14/2024 Full name of contributor Babb, Daniel Employer (See Instructions) Microsoft Amount of Contribution (\$) \$200.00 Date 10/20/2024 Full name of contributor Barnet, Alice Contributor address; City; State; Zip Code Amount of Contribution (\$) \$250.00 Date 03/12/2024 Full name of contributor Barnet, Alice Contributor address; City; State; Zip Code Amount of Contribution (\$) \$250.00 Date 10/20/2024 Full name of contributor Bartos, Janet P Contributor address; City; State; Zip Code Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Not Employed Amount of Contribution (\$) \$25.00 Date 10/20/2024 Full name of contributor Bartos, Janet P Contributor address; City; State; Zip Code <td>2 FILER NA</td> <td>ME</td> <td></td> <td>3 Filer ID (Ethics Commission Filers)</td>	2 FILER NA	ME		3 Filer ID (Ethics Commission Filers)
07/03/2024 Ayres, Jonathan s10 6 Contributor address; City, State; Zip Code Manchaca, TX 78652-3037 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/14/2024 Babb, Daniel Contributor address; City; State; Zip Code Amount of Contribution (\$) 02 Data Full name of contributor out-of-state PAC (ID#:	07/03/2024 Ayres, Jonathan \$10.0 6 Contributor address; City, State; Zip Code \$10.0 7 Manchaca, TX 78652-3037 9 Employer (See Instructions) Not Employed \$10.0 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Amount of Contribution (\$) 12/14/2024 Babb, Daniel Contributor address; City, State; Zip Code Amount of Contribution (\$) \$100.0 12/14/2024 Babb, Daniel Contributor address; City, State; Zip Code Amount of Contribution (\$) \$100.0 0allas, TX 7529-2737 Employer (See Instructions) Account Manager Amount of Contribution (\$) \$250.0 09/12/2024 Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) \$250.0 09/12/2024 Barnett, Alice Site Instructions) Not Employed Amount of Contribution (\$) \$250.0 01/20/2024 Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) \$250.0 01/20/2024 Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) \$250.0 0/20/2024 Bartos, Janet P Contributor addreses; City, State;				
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Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occupation / Job title (See Instructions) Employer (See Instructions)				

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	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/120 Rpt: 10/199	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Johnson, Na	athan M. (The Honorable)				00081605	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	11/13/2024	Bedford, Dave					\$200.00
		6 Contributor address; City; Sta	ate; Zip Code		1		
		Dallas, TX 75233-3304					
8	Principal occu	pation / Job title (See Instructions))	9 Employer (See Instructions	<u> </u> ເ)		
Ũ	Not employe		,	Not employed	,		
	Date	Full name of contributor			<u> </u>	Amount of Contribution (\$)	
	11/27/2024	Beef PAC	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	11/21/2024						Φ1,000.00
		Contributor address; City; Sta	ate; Zip Code				
		Amarillo, TX 79106-4617					
	Principal occu	I pation / Job title (See Instructions))	Employer (See Instructions	<u> </u> ;)		
	·	· · ·					
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/15/2024	Beer Alliance of Texas PA				· · · · · · · · · · · · · · · · · · ·	\$1,000.00
		Contributor address; City; Sta					
			,				
		Austin, TX 78701-2656					
	Principal occu	ipation / Job title (See Instructions))	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/20/2024	Beer Alliance of Texas PA	кС				\$1,000.00
		Contributor address; City; Sta	ate; Zip Code		1		
		Austin, TX 78701-2656		<u> </u>	<u> </u>		
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	5)		
					-		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	<u>م</u> ح 00
	08/16/2024	Beeson, Karen					\$5.00
		Contributor address; City; Sta	ate; Zip Code				
		Dallas, TX 75243-8006					
	Princinal occu	pation / Job title (See Instructions)	<u>,</u>	Employer (See Instructions	<u> </u> ເ)		
	Not Employe		,	Not Employed	"		
	Not						

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 7/120 Rpt: 11/199
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Johnson, Nathan M. (The Honorable)	00081605
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/15/2024 Ben E. Keith Company Texas PAC	\$2,500.00
6 Contributor address; City; State; Zip Code	1
Fort Worth, TX 76102-5501	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	3)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/06/2024 Berry, Carl L	\$10.00
Contributor address; City; State; Zip Code	
Westcliffe, CO 81252-9126	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	s)
retired none	,
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/02/2024 Berry, Mary	\$25.00
Contributor address; City; State; Zip Code	1
Dallas, TX 75234-6234	
Principal occupation / Job title (See Instructions) Employer (See Instructions	5)
Flight attendant Delta Airlines	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/02/2024 Berry, Mary	\$25.00
Contributor address; City; State; Zip Code	
Dallas, TX 75234-6234	
Principal occupation / Job title (See Instructions) Employer (See Instructions	s)
Flight attendant Delta Airlines	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/02/2024 Berry, Mary	\$25.00
Contributor address; City; State; Zip Code	1
Dallas, TX 75234-6234	
Principal occupation / Job title (See Instructions) Employer (See Instructions	5)
Flight attendant Delta Airlines	

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	The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 8/120 Rpt: 12/199
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		athan M. (The Honorable)		00081605
4	Date	5 Full name of contributor Dut-of-state PAC (ID)#:)	7 Amount of Contribution (\$)
	10/02/2024	Berry, Mary		\$25.00
		6 Contributor address; City; State; Zip Code		
		Dallas, TX 75234-6234		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
	Flight attend	ant	Delta Airlines	
╞	Date	Full name of contributor out-of-state PAC (IDa)#:)	Amount of Contribution (\$)
	11/02/2024	Berry, Mary		\$25.00
		Contributor address; City; State; Zip Code		
		Dallas, TX 75234-6234		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)
	Flight attend	ant	Delta Airlines	
	Date	Full name of contributor out-of-state PAC (ID:)#:)	Amount of Contribution (\$)
	12/14/2024	Beversdorf, Anne		\$6.00
		Contributor address; City; State; Zip Code		
		A		
\vdash	Duin singl oppu	Austin, TX 78750-2037		,
	Not Employe	ipation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)
				1
	Date)#:)	Amount of Contribution (\$)
	10/15/2024	Bing, Eric		\$1,000.00
		Contributor address; City; State; Zip Code		
		Houston, TX 77056-1226		
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	
		of Health Care Professions	Chancellor	<i>,</i>
╞	Date			Amount of Contribution (\$)
	Date 11/27/2024	Full name of contributor out-of-state PAC (ID) Bird, Brandi	#:)	\$2,500.00
		Contributor address; City; State; Zip Code		Ψ2,000.00
		Contributor address, City, State, Zip Code		
		Lantana, TX 76226-1120		
	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	۱ ۶)
	Consultant	•	Bird Advocacy & Consu	
⊢				

	The Instru	ction Guide explains how to complete th	s fo	rm.	1	Total pages Schedule A1: Sch: 9/120 Rpt: 13/199	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		athan M. (The Honorable)				00081605	
4	Date	5 Full name of contributor out-of-state PAC (I	D#:)	7	Amount of Contribution (\$)	
	10/23/2024	Black, Tre'					\$2,070.25
		6 Contributor address; City; State; Zip Code			1		
		Dallas, TX 75208-3941					
8	Principal occu	pation / Job title (See Instructions)	9	B Employer (See Instructions	5)		
	Executive			On-Target Supplies & L	ogi	stics	
	Date	Full name of contributor Out-of-state PAC (I	D#:)		Amount of Contribution (\$)	
	07/03/2024	Blacksberg, Barbara					\$3.00
		Contributor address; City; State; Zip Code					
		· · · · · · · · · · · · · · · · · · ·					
		Laurel, MD 20724-2023					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u> ة)		
	Not Employe	ed		Not Employed			
⊨	Date	Full name of contributor Out-of-state PAC (I)	Г	Amount of Contribution (\$)	
	11/27/2024	Blake, Douglas	שת			Allount of Continention (+)	\$500.00
	±±, = . , =	Contributor address; City; State; Zip Code					4000
		Fort Worth, TX 76113-2031					
	Principal occu	I upation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
					,		
╞	Date	Full name of contributor out-of-state PAC (I	<u> </u>)		Amount of Contribution (\$)	
	08/21/2024	Blocker, Lisa	J#			Allount of Contribution (+)	\$1,000.00
	00,21,202.	Contributor address; City; State; Zip Code					Ψ1,000.00
		Continuutor address, City, State, Zip Code					
		Fort Worth, TX 76107-3065					
\vdash	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>լ</u> ։)		
	Not employe			Not employed	,		
⊨				, , , , , , , , , , , , , , , , , , , ,	<u> </u>	Amount of Contribution (¢)	
	Date 07/01/2024	Full name of contributor Out-of-state PAC (I Bloise, Ann	J#:)		Amount of Contribution (\$)	\$25.00
	0770172024						φ25.00
		Contributor address; City; State; Zip Code					
		Dallas, TX 75254-8482					
⊢	Principal occu	upation / Job title (See Instructions)	— ––	Employer (See Instructions	<u> </u>		
	Planner			Southwest Airlines	<i>)</i>		
	Паппе			Southwest Annues			

The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 10/120 Rpt: 14/199	
2 FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
Johnson, Na	athan M. (The Honorable)			00081605	
4 Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7	Amount of Contribution (\$)	,
08/13/2024	Bogen, Sheryl and Gordon				\$100.00
	6 Contributor address; City; State; Zip Code		Ϊ		
2 Dringingligg	Dallas, TX 75230-2243				
8 Principal occu Not Employe	ipation / Job title (See Instructions) ed	9 Employer (See Instructions Not Employed	is)		
Date	Full name of contributor out-of-state PAC (ID#	t:)	T	Amount of Contribution (\$)	
10/10/2024	Boland, William				\$5.00
	Contributor address; City; State; Zip Code]		
	Miami, FL 33133-5433				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	⊥		
Physiologist		BodyFix Method	~,		
Date	Full name of contributor Out-of-state PAC (ID#		$\overline{\top}$	Amount of Contribution (\$)	
10/15/2024	Bresnen, Amy	·			\$500.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78701-2915	-			
-	ipation / Job title (See Instructions)	Employer (See Instructions	is)		
Attorney		Bresnen Associates	—		
Date	Full name of contributor out-of-state PAC (ID#	¢:)		Amount of Contribution (\$)	AF 00
07/18/2024	Bright, Larry				\$5.00
	Contributor address; City; State; Zip Code				
	Ypsilanti, MI 48197-8985				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
Not Employe	€d	Not Employed			
Date	Full name of contributor X out-of-state PAC (ID#	#: <u>C00035675</u>)	$\overline{\top}$	Amount of Contribution (\$)	<u> </u>
11/27/2024	Bristol-Myers Squibb Company PAC				\$500.00
	Contributor address; City; State; Zip Code		"		
	Austin, TX 78737-4740				
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 11/120 Rpt: 15/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	athan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
12/14/2024	Brogden, William		\$5.00
	6 Contributor address; City; State; Zip Code		
	Leander, TX 78641-9396		
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)
Retired		Retired	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/16/2024	Brookshire, Stephen		\$50.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75225-2812		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)
Real estate		Atlantic Financial Manag	gers
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/14/2024	Brookshire, Stephen		\$100.00
	Contributor address; City; State; Zip Code		1
	Dallas, TX 75225-2812	1	
	ipation / Job title (See Instructions)	Employer (See Instructions	,
Real estate		Atlantic Financial Manag	-
Date)	Amount of Contribution (\$)
12/14/2024	Brownscombe, Tom		\$25.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77005-2355		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
Not Employe		Not Employed	-,
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)
08/13/2024	Bryant, Judy)	\$25.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75231-5883		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)
Not employe	ed	Not employed	

The Instru	ction Guide explains how to complete this f	orm.		otal pages Schedule A1: ch: 12/120 Rpt: 16/199	
2 FILER NAME			3 Fi	ler ID (Ethics Commissio	on Filers)
Johnson, Na	than M. (The Honorable)			0081605	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Ar	mount of Contribution (\$)	
12/14/2024	Buchanan, Lillian				\$10.00
	6 Contributor address; City; State; Zip Code		1		
	Austin, TX 78702-2834				
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Therapist		Lillian Buchanan			
Date	Full name of contributor out-of-state PAC (ID#:_)	Ar	mount of Contribution (\$)	
08/04/2024	Buck, Slader				\$50.00
	Contributor address; City; State; Zip Code		1		
	Encinitas, CA 92023-0128				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Not Employe	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:_)	Ar	mount of Contribution (\$)	
10/04/2024	Bundick, Luz	/		(1)	\$20.00
	Contributor address; City; State; Zip Code		ł		,
	Round Rock, TX 78680-0617				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Not Employe	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:)	Ar	mount of Contribution (\$)	
08/21/2024	Burke, James				\$2,500.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75229-5410				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
CEO		Vistra Energy			
Date	Full name of contributor out-of-state PAC (ID#:_)	Ar	mount of Contribution (\$)	
12/14/2024	Bush, Janie R				\$25.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75229-4960				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Not Employe	ed	Not Employed			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/120 Rpt: 17/199	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		than M. (The Honorable)			00081605	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/16/2024	Butler, Daniel				\$500.00
		6 Contributor address; City; State; Zip Code		1		
		Dallas, TX 75229-5248				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Not employe	d	Not employed			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Г	Amount of Contribution (\$)	
	07/03/2024	Buttery, Mary Kay)		/ income of Contains allow (+)	\$2.00
		Contributor address; City; State; Zip Code		•		+=.00
		Contributor address, City, State, Zip Code				
		Pahrump, NV 89048-6083				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Not Employe		Not Employed	3)		
				_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/27/2024	Byrne, J. Tim			:	\$10,000.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75201-2027				
	•	pation / Job title (See Instructions)	Employer (See Instructions			
	CEO		Lincoln Property Compa	any		
	Date	Full name of contributor X out-of-state PAC (ID#:) (00348938		Amount of Contribution (\$)	
	10/15/2024	CHUBB Group Holding Inc PAC				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Philadelphia, PA 19106-3703				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/20/2024	Cain, Randy				\$250.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78763-5352				
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L		
	Attorney Lob	· · · ·	R.Cain Law	,		
		~,				

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	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 14/120 Rpt: 18/199	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		than M. (The Honorable)			00081605	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/15/2024	Cain, Sally				\$200.00
		6 Contributor address; City; State; Zip Code		1		
		Dallas, TX 75214-5604	-			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Educator		Garland ISD			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/02/2024	Carmack, Deona				\$25.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75211-2513	-			
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/27/2024	Carona, John				\$2,500.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75205-9806	i			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	CEO		Associa			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/22/2024	Carr, Bryan				\$50.00
		Contributor address; City; State; Zip Code]		
		E-inco. TX 75022 2000				
	Deine in all a serie	Frisco, TX 75033-2868				
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Accountant		Bryan Carr			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	±
	10/17/2024	Carsrud, Alan				\$25.00
		Contributor address; City; State; Zip Code				
		Spicowood TX 78660 2029				
	Drinoinal as	Spicewood, TX 78669-3038	Employer (Cas Instruction			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	;u	Not Employed			

The Instruc 2 FILER NAME	ation Cuido avaloino hourto completo this fr		A Tatal was a Calcadula A4.	
	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 15/120 Rpt: 19/199	
			3 Filer ID (Ethics Commissio	n Filers)
	than M. (The Honorable)		00081605	
4 Date	5 Full name of contributor out-of-state PAC (ID#:		7 Amount of Contribution (\$)	
10/24/2024	Carsrud, Alan			\$25.00
	6 Contributor address; City; State; Zip Code			
	Spicewood, TX 78669-3038			
8 Principal occu		9 Employer (See Instructions)		
Not Employe		Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/05/2024	Chabot, Ann			\$10.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75238-3711			
	pation / Job title (See Instructions)	Employer (See Instructions)		
IT PM		Amdocs Inc		
			Amount of Contribution (\$)	
Date	Full name of contributor 🛛 out-of-state PAC (ID#:)	Amount of Contribution (\$)	
Date 08/13/2024	Chambers, Thomas			\$500.00
				\$500.00
	Chambers, Thomas			\$500.00
	Chambers, Thomas Contributor address; City; State; Zip Code			\$500.00
08/13/2024	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610			\$500.00
08/13/2024 Principal occu	Chambers, Thomas Contributor address; City; State; Zip Code	Employer (See Instructions)		\$500.00
08/13/2024	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610			\$500.00
08/13/2024 Principal occu	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610	Employer (See Instructions) TerraCORE Panels		\$500.00
08/13/2024 Principal occu CEO	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent	Employer (See Instructions) TerraCORE Panels		\$500.00
08/13/2024 Principal occur CEO Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_	Employer (See Instructions) TerraCORE Panels		
08/13/2024 Principal occur CEO Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent	Employer (See Instructions) TerraCORE Panels		
08/13/2024 Principal occur CEO Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code	Employer (See Instructions) TerraCORE Panels		
08/13/2024 Principal occur CEO Date 08/21/2024	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code Dallas, TX 75214-3108	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	
08/13/2024 Principal occur CEO Date 08/21/2024	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code Dallas, TX 75214-3108 pation / Job title (See Instructions)	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code Dallas, TX 75214-3108 pation / Job title (See Instructions)	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code Dallas, TX 75214-3108 pation / Job title (See Instructions) Affairs Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code Dallas, TX 75214-3108 pation / Job title (See Instructions) Affairs Full name of contributor out-of-state PAC (ID#:_	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date 10/05/2024	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$) Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occu	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions)	Employer (See Instructions)		\$500.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code Dallas, TX 75214-3108 pation / Job title (See Instructions)	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code Dallas, TX 75214-3108 pation / Job title (See Instructions) Affairs	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code Dallas, TX 75214-3108 pation / Job title (See Instructions) Affairs Full name of contributor out-of-state PAC (ID#:_	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date 10/05/2024	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code Dallas, TX 75214-3108 Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code Dallas, TX 75214-3108 Dallas, TX 75214-3108	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$) Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occu CEO	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions)	Employer (See Instructions) TerraCORE Panels		\$500.C
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code Dallas, TX 75214-3108 pation / Job title (See Instructions) Affairs	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code Dallas, TX 75214-3108 pation / Job title (See Instructions) Affairs Full name of contributor out-of-state PAC (ID#:_	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code Dallas, TX 75214-3108 pation / Job title (See Instructions) Affairs Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$)	\$1,000.00
08/13/2024 Principal occur CEO Date 08/21/2024 Principal occur Government Date 10/05/2024	Chambers, Thomas Contributor address; City; State; Zip Code Dallas, TX 75207-6610 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code Dallas, TX 75214-3108 pation / Job title (See Instructions) Affairs Full name of contributor out-of-state PAC (ID#:_ Chaney, Brent Contributor address; City; State; Zip Code Dallas, TX 75214-3108 pation / Job title (See Instructions) Affairs Full name of contributor contributor contributor address; City; State; Zip Code Dallas, TX 75214-3108 pation / Job title (See Instructions)	Employer (See Instructions) TerraCORE Panels	Amount of Contribution (\$) Amount of Contribution (\$)	\$1,000.00

The Instru	ction Guide explains how to complete this f	orm.		Fotal pages Schedule A1: Sch: 16/120 Rpt: 20/199	
2 FILER NAME				- Filer ID (Ethics Commissio	on Filers)
	athan M. (The Honorable)			00081605	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 4	Amount of Contribution (\$)	
10/08/2024	Charles, Deanna				\$103.75
	6 Contributor address; City; State; Zip Code		·		
	Dallas, TX 75205-1225				
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Retired		Retired			
Date	Full name of contributor Out-of-state PAC (ID#:_)	A	Amount of Contribution (\$)	
08/14/2024	Chase, Scott			.,	\$100.00
	Contributor address; City; State; Zip Code		·		·
	Dallas, TX 75208-2503				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Attorney		Self employed			
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	4	Amount of Contribution (\$)	
12/13/2024	Chase, Scott			•	\$50.00
	Contributor address; City; State; Zip Code		·		
	Dallas, TX 75208-2503				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Attorney		Self employed			
Date	Full name of contributor out-of-state PAC (ID#:)	A	Amount of Contribution (\$)	
10/15/2024	Chevron Employees PAC				\$2,000.00
	Contributor address; City; State; Zip Code		1		
	San Ramon, CA 94583-0716	•			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:_)	A	Amount of Contribution (\$)	_
10/09/2024	Chino, Vera				\$10.00
	Contributor address; City; State; Zip Code				
	Usuatan TV 770EE 6710				
D in single again	Houston, TX 77055-6719		Ĺ		
	ipation / Job title (See Instructions)	Employer (See Instructions	S)		
Retired		Retired			

The Instru	iction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 17/120 Rpt: 21/199	
2 FILER NAME Johnson, Na	athan M. (The Honorable)		1	Filer ID (Ethics Commissio 00081605	on Filers)
4 Date 11/20/2024				Amount of Contribution (\$)	\$1,000.00
	Philadelphia, PA 19192-0003				
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
Date 11/27/2024	Full name of contributor vot-of-state PAC (ID#: <u>C</u> Citigroup Inc. Political Action Committee- State Contributor address; City; State; Zip Code Washington, DC 20004-2524			Amount of Contribution (\$)	\$1,500.00
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> \$)		
Date 07/01/2024	Full name of contributor out-of-state PAC (ID#: Citzman, Manfred Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
	Dallas, TX 75231-5646				
Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions) Not Employed	3)		
Date 08/23/2024	Full name of contributor out-of-state PAC (ID#: Citzman, Manfred Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
Principal occi	Dallas, TX 75231-5646 upation / Job title (See Instructions)	Employer (See Instructions)	 s)		
Not Employe		Not Employed	·,		
Date 12/13/2024	Full name of contributor out-of-state PAC (ID#: Clements, Karey Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
- · · · · · · · · · · · · · · · · · · ·	League City, TX 77573-5973		Ĺ		
Principal occu Sales	upation / Job title (See Instructions)	Employer (See Instructions) FH&W	3)		

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	The Instru	ction Guide explains how to complete	e this f	orm.	1	Total pages Schedule A1: Sch: 18/120 Rpt: 22/199	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		athan M. (The Honorable)				00081605	
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:_)	7	Amount of Contribution (\$)	
	07/03/2024	Coakley, Gerda					\$10.00
		6 Contributor address; City; State; Zip Code					
Ļ	Dringing Loop	Colleyville, TX 76034-3757	1	Contraction			
ð	Not Employe	ipation / Job title (See Instructions)		9 Employer (See Instructions Not Employed	5)		
╘					.		
	Date		AC (ID#:_)		Amount of Contribution (\$)	¢100.00
	11/01/2024						\$100.00
		Contributor address; City; State; Zip Code					
		Atlanta, GA 30306-3138					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Retired			Retired	,		
⊨	Date	Full name of contributor out-of-state PA	AC (ID#:)	Ι	Amount of Contribution (\$)	
	07/07/2024	Cohen, Janet	//0 (.2			,	\$25.00
	-	Contributor address; City; State; Zip Code					
		Brooklyn, NY 11215-4502					
		ipation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	;d		Not Employed			
	Date	Full name of contributor 🔲 out-of-state PA	AC (ID#:_)		Amount of Contribution (\$)	
	07/12/2024	Collins, Donna					\$25.00
		Contributor address; City; State; Zip Code					
		Dallas, TX 75229-5239					
┝	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> :)		
	Court reporte			Collins Realtime Report		P.C.	
╞		· · · · · · · · · · · · · · · · · · ·		\	I		
	Date 07/13/2024	Full name of contributor out-of-state PA Collins, Donna	AC (ID#:_)		Amount of Contribution (\$)	\$10.00
	0111012024	Contributor address; City; State; Zip Code					Ψ10.00
		Continuator address, City, State, Zip Code					
		Dallas, TX 75229-5239					
⊢	Principal occu	I Ipation / Job title (See Instructions)		Employer (See Instructions	5)		
	Court reporte	er/captioner		Collins Realtime Report	ing	P.C.	
┢							

The Instru	ction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 19/120 Rpt: 23/199		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	;)
	athan M. (The Honorable)		00081605	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7 Amount of Contribution (\$)	
08/17/2024	Collins, Donna		\$25	5.00
	6 Contributor address; City; State; Zip Code		1	
	Dallas, TX 75229-5239			
-	upation / Job title (See Instructions)	9 Employer (See Instructions		
Court report	er/captioner	Collins Realtime Report	ίng P.C.	
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	
08/18/2024	Collins, Donna		\$10	0.00
	Contributor address; City; State; Zip Code		1	
	Dallas, TX 75229-5239			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions		
Court report	er/captioner	Collins Realtime Report	ing P.C.	
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	_
09/13/2024	Collins, Donna		\$10	0.00
	Contributor address; City; State; Zip Code	,	1	
	Dallas, TX 75229-5239			
	upation / Job title (See Instructions)	Employer (See Instructions		
Court report	er/captioner	Collins Realtime Report	ίng Ρ.C.	
Date	Full name of contributor Out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	
10/13/2024	Collins, Donna		\$10	0.00
	Contributor address; City; State; Zip Code		1	
	Dallas, TX 75229-5239			
	upation / Job title (See Instructions)	Employer (See Instructions		
Court report	er/captioner	Collins Realtime Report	.ing P.C.	
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	_
11/13/2024	Collins, Donna		\$10	0.00
	Contributor address; City; State; Zip Code]	
	Dallas, TX 75229-5239		<u> </u>	
	upation / Job title (See Instructions)	Employer (See Instructions		
Court report	er/captioner	Collins Realtime Report	ing P.C.	

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	The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 20/120 Rpt: 24/199
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		athan M. (The Honorable)		00081605
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	12/13/2024	Collins, Donna		\$10
	I	6 Contributor address; City; State; Zip Code		
		Dallas, TX 75229-5239		
8		pation / Job title (See Instructions)	9 Employer (See Instructions)	
	Court reporte	er/captioner	Collins Realtime Reporti	rting P.C.
	Date	Full name of contributor X out-of-state PAC (ID#:	C00248716)	Amount of Contribution (\$)
	12/02/2024	Comcast Corporation & NBCuniversal PAC		\$1,500
	1	Contributor address; City; State; Zip Code		
		Philadelphia, PA 19103-2833		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ls)
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/15/2024	Comerica Incorporated Political Action Committ	tee	\$3,500
	I	Contributor address; City; State; Zip Code		
		Dallas, TX 75201-4612		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	is)
	Date	Full name of contributor X out-of-state PAC (ID#:_	C00002089)	Amount of Contribution (\$)
	08/21/2024	Communication Workers of America - COPE Po	olitical Contribution	\$1,500
	I	Contributor address; City; State; Zip Code		
		Washington, DC 20001-2760		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	is)
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/09/2024	Conatser, Jo & Charles		\$5
	I	Contributor address; City; State; Zip Code		
		Lubbock, TX 79411-1821		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	 IS)
	Retired		Retired	
			<u> </u>	

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: Sch: 21/120 Rpt: 25/199 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 00081605 3 Filer ID (Ethics Commission Filers) 00081605 00081605 4 Date 10/09/2024 5 Full name of contributor out-of-state PAC (ID#) 7 6 Contributor address; City, State; Zip Code - - 6 Contributor address; City, State; Zip Code - - 1 Lubbock, TX 79411-1821 - - - 8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired - Amount of Contribution (\$) 11/27/2024 Full name of contributor out-of-state PAC (ID#
Johnson, Nuthan M. (The Honorable) 00081605 4 Date 10/09/2024 5 Full name of contributor out-of-state PAC (ID#:
Johnson, Nuthan M. (The Honorable) 00081605 4 Date 10/09/2024 5 Full name of contributor out-of-state PAC (ID#:
10/09/2024 Conatser, Jo & Charles S5.0 6 Contributor address; City; State; Zip Code Lubbock, TX 79411-1821 8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) ConcoOPhillips SPIRIT PAC Amount of Contribution (\$) 11/27/2024 Full name of contributor out-of-state PAC (ID#:) ConcoOPhillips SPIRIT PAC Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) \$1,000.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$1,000.0 Date Full name of contributor out-of-state PAC (ID#:
6 Contributor address; City; State; Zip Code Lubbock, TX 79411-1821 Lubbock, TX 79411-1821 8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#;) ConccoPhillips SPIRIT PAC Amount of Contribution (\$) \$1,000.0 11/27/2024 Full name of contributor out-of-state PAC (ID#;) Contributor address; City; State; Zip Code Amount of Contribution (\$) \$1,000.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$1,000.0 Date Full name of contributor out-of-state PAC (ID#;) Cope, Lester Amount of Contribution (\$) \$3.0 Date Full name of contributor out-of-state PAC (ID#;) Cope, Lester Amount of Contribution (\$) \$3.0 12/14/2024 Full name of contributor out-of-state PAC (ID#;) Contributor address; City; State; Zip Code Amount of Contribution (\$) \$3.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Employer (See Instructions) Not Employed
6 Contributor address; City; State; Zip Code Lubbock, TX 79411-1821 Lubbock, TX 79411-1821 8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/27/2024 ConocoPhillips SPIRIT PAC
8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/27/2024 ConocoPhillips SPIRIT PAC S1,000.0 Contributor address; City; State; Zip Code Amount of Contribution (\$) Bartlesville, OK 74004-0001 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Cope, Lester Amount of Contribution (\$) Contributor address; City; State; Zip Code Houston, TX 77074-2807 Amount of Contributions) Principal occupation / Job title (See Instructions) Employer (See Instructions) \$motor Single Contributions) Not Employed Not Employed Ket Pactor Ket Pactor
8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/27/2024 ConocoPhillips SPIRIT PAC \$1,000.0 Contributor address; City; State; Zip Code Amount of Contribution (\$) Bartlesville, OK 74004-0001 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributor address; City; State; Zip Code Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Cope, Lester Contributor address; City; State; Zip Code Houston, TX 77074-2807 Houston, TX 77074-2807 Employer (See Instructions) Not Employed Not Employed Not Employed
8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/27/2024 ConocoPhillips SPIRIT PAC \$1,000.0 Contributor address; City; State; Zip Code Amount of Contribution (\$) Bartlesville, OK 74004-0001 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributor address; City; State; Zip Code Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Cope, Lester Contributor address; City; State; Zip Code Houston, TX 77074-2807 Houston, TX 77074-2807 Employer (See Instructions) Not Employed Not Employed Not Employed
Retired Retired Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/27/2024 ConocoPhillips SPIRIT PAC \$1,000.0 Contributor address; City; State; Zip Code bartlesville, OK 74004-0001 \$1,000.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/14/2024 Cope, Lester Amount of Contribution (\$) \$3.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$3.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$3.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$3.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$3.0 Not Employed Not Employed Imployed Imployed
11/27/2024 ConocoPhillips SPIRIT PAC \$1,000.0 Contributor address; City, State; Zip Code Sartlesville, OK 74004-0001 \$1,000.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/14/2024 Cope, Lester Contributor address; City; State; Zip Code \$3.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$3.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$3.0 Not Employed Not Employed Not Employed See Instructions)
Contributor address; City; State; Zip Code Bartlesville, OK 74004-0001 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Cope, Lester Contributor address; City; State; Zip Code Amount of Contribution (\$) Contributor address; City; State; Zip Code \$3.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Employer (See Instructions)
Bartlesville, OK 74004-0001 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Cope, Lester Amount of Contribution (\$) Contributor address; City; State; Zip Code Amount of Contribution (\$) Houston, TX 77074-2807 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Employed
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Cope, Lester Contributor address; City; State; Zip Code \$3.0 Houston, TX 77074-2807 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Motemployed
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Cope, Lester Amount of Contribution (\$) Contributor address; City; State; Zip Code Houston, TX 77074-2807 \$3.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$3.0 Not Employed Not Employed Employer (See Instructions)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/14/2024 Cope, Lester \$3.0 Contributor address; City; State; Zip Code Houston, TX 77074-2807 \$3.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$3.0 Not Employed Employer (See Instructions) Not Employed
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/14/2024 Cope, Lester \$3.0 Contributor address; City; State; Zip Code \$3.0 Houston, TX 77074-2807 Houston, TX 77074-2807 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed
12/14/2024 Cope, Lester \$3.0 Contributor address; City; State; Zip Code \$3.0 Houston, TX 77074-2807 Frincipal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed
12/14/2024 Cope, Lester \$3.0 Contributor address; City; State; Zip Code \$3.0 Houston, TX 77074-2807 Frincipal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Not Employed
Contributor address; City; State; Zip Code Houston, TX 77074-2807 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed
Contributor address; City; State; Zip Code Houston, TX 77074-2807 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed
Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed
Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed
Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed
Not Employed Not Employed
08/16/2024 Crain, William \$25.0
Contributor address; City; State; Zip Code
Dallas, TX 75238-2518
Principal occupation / Job title (See Instructions) Employer (See Instructions)
Sr. Account Manager Brenntag Southwest
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
12/13/2024 Cranshaw, Dorie Jean \$100.0
Contributor address; City; State; Zip Code
Contributor address; City; State; Zip Code
Dallas, TX 75209-3118
Dallas, TX 75209-3118 Principal occupation / Job title (See Instructions) Employer (See Instructions)
Dallas, TX 75209-3118

				_		
The Instruc	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 22/120 Rpt: 26/199	
2 FILER NAME				3	Filer ID (Ethics Commission	Filers)
Johnson, Na	than M. (The Honorable)				00081605	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
10/22/2024	Crews, Anne					\$250.00
	6 Contributor address; City; State; 2	Zip Code				
	Addison, TX 75001-6801	1				
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
				1		
Date		out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷05.00
10/17/2024	Crumpecker, Brad					\$25.00
	Contributor address; City; State; 2	Zip Code				
	Dallas, TX 75244-7626					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ו)		
CEO	julion, coo allo (occ		Robinson Clay Inc.	,		
Date	Full name of contributor	out-of-state PAC (ID#:		Ι	Amount of Contribution (\$)	
12/14/2024	Crumpecker, Brad	יישיו סה ו שווניוסיי	/		Allount of Contribution (4)	\$50.00
 , -	Contributor address; City; State; Z	7in Code				400
		210 0000				
	Dallas, TX 75244-7626					
	pation / Job title (See Instructions)		Employer (See Instructions	5)		
CEO			Robinson Clay Inc.			
Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
12/14/2024	Curts, Rosemary					\$25.00
	Contributor address; City; State; 2	Zip Code				
	Dallas, TX 75211-5529					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u>		
Teacher			Dallas ISD	9		
	Full name of contributor			<u> </u>	Amount of Contribution (\$)	
Date 07/01/2024	Cutshall, Hannah Davis	out-of-state PAC (ID#:)			\$50.00
01101/2021	Contributor address; City; State; 2	7in Code				Ψ00.00
	Continuation address, City, State, 2					
	Dallas, TX 75219-4693					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	. 5)		
Investments			Self employed			
		·				

The Instru	iction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 23/120 Rpt: 27/199	
2 FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
Johnson, Na	athan M. (The Honorable)			00081605	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
07/05/2024					\$100.00
	6 Contributor address; City; State; Zip Code				
	Dallas, TX 75219-4693				
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
Investments		Self employed			
Date	Full name of contributor out-of-state PAC (ID#:_)]	Amount of Contribution (\$)	—
08/05/2024	Cutshall, Hannah Davis				\$100.00
	Contributor address; City; State; Zip Code]		
	Dallas, TX 75219-4693				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Investments		Self employed	3)		
Date	Full name of contributor out-of-state PAC (ID#:		—	Amount of Contribution (\$)	
09/05/2024	Full name of contributor out-of-state PAC (ID#: Cutshall, Hannah Davis)			\$100.00
03/03/2024	Contributor address; City; State; Zip Code				Φ100.00
	Dallas, TX 75219-4693				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Investments	j	Self employed			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
10/05/2024	Cutshall, Hannah Davis				\$100.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75219-4693				
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Investments		Self employed			
Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
11/05/2024	Cutshall, Hannah Davis				\$100.00
	Contributor address; City; State; Zip Code				
	Dallas, TX 75219-4693				
-	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Investments	, ,	Self employed			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 24/120 Rpt: 28/199	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Johnson, Na	athan M. (The Honorable)		00081605	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
12/13/2024	Cutshall, Hannah Davis		\$250	.00
	6 Contributor address; City; State; Zip Code			
	Dallas, TX 75219-4693			
-	upation / Job title (See Instructions)	9 Employer (See Instructions	ns)	
Investments		Self employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/20/2024	Dahlander, Heidi		\$50	.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75229-5237			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	is)	
Not Employe	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	_
10/15/2024	Dallas Police Officer PAC		\$1,000	.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75215-1101			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ns)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/15/2024	Danielle Delgadillo Consulting		\$500	.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701-1854			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ns)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/16/2024	Danley, Kathleen and Mike		\$10	.00
	Contributor address; City; State; Zip Code			
	La Verne, CA 91750-2373			
	ipation / Job title (See Instructions)	Employer (See Instructions	ns)	
Not Employe	ed	Not Employed		

The Instru	ction Guide explains how to complete th	nis form.	1 Total pages Schedule A1: Sch: 25/120 Rpt: 29/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	athan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of Contribution (\$)
07/10/2024	Davis, John		\$10.0
	6 Contributor address; City; State; Zip Code		
	Bellingham, WA 98229-2347		
	upation / Job title (See Instructions)	9 Employer (See Instruction	IS)
Not employe	;d	Not employed	
Date	—	(ID#:)	Amount of Contribution (\$)
10/24/2024	Davis, John		\$10.0
	Contributor address; City; State; Zip Code		
	Bellingham, WA 98229-2347		
•	upation / Job title (See Instructions)	Employer (See Instruction	IS)
Not employe	:d	Not employed	
Date		(ID#:)	Amount of Contribution (\$)
07/12/2024	De La Cruz, Sandra		\$10.0
	Contributor address; City; State; Zip Code		1
D in single and	Dallas, TX 75220-3749		<u> </u>
Principal occu Not Employe	upation / Job title (See Instructions)	Employer (See Instruction Not Employed	IS)
Date		(ID#:)	Amount of Contribution (\$)
07/23/2024	De La Cruz, Sandra		\$10.0
	Contributor address; City; State; Zip Code		
	Dallas, TX 75220-3749		
Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	
Not Employe		Not Employed	5)
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of Contribution (\$)
08/12/2024	De La Cruz, Sandra		\$10.0
	Contributor address; City; State; Zip Code		
	Dallas, TX 75220-3749		
Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	
Not Employe		Not Employed	

			1 Total pages Schedule A1:
The Instru	ction Guide explains how to complete this f	form.	Sch: 26/120 Rpt: 30/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Johnson, Na	athan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
08/23/2024			\$10.0
	6 Contributor address; City; State; Zip Code		
	Dallas, TX 75220-3749		-
	upation / Job title (See Instructions)	9 Employer (See Instructions))
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/12/2024	De La Cruz, Sandra		\$10.0
	Contributor address; City; State; Zip Code		
Driv single age	Dallas, TX 75220-3749		<u> </u>
-	upation / Job title (See Instructions)	Employer (See Instructions)	.)
Not Employe		Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/23/2024	De La Cruz, Sandra		\$10.0
	Contributor address; City; State; Zip Code		
	Dallas TV 75220 2740		
Dringing occ	Dallas, TX 75220-3749	Employer (See Instructions	
Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions) Not Employed	·)
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/12/2024	De La Cruz, Sandra		\$10.0
	Contributor address; City; State; Zip Code		
	Dallas, TX 75220-3749		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>لــــــــــــــــــــــــــــــــــــ</u>
Not Employe		Not Employed)
Date			Amount of Contribution (\$)
10/23/2024	Full name of contributor out-of-state PAC (ID#: De La Cruz, Sandra	,	Amount of Contribution (\$) \$10.0
			\$10.0
	Contributor address; City; State; Zip Code		
	Dallas, TX 75220-3749		
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> ;)
Not Employe		Not Employed	,

The Instru	ction Guide explains how to complete this f	orm.		tal pages Schedule A1: ch: 27/120 Rpt: 31/199	
2 FILER NAME			3 Fil	er ID (Ethics Commission	n Filers)
	athan M. (The Honorable)			0081605	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 An	nount of Contribution (\$)	
11/12/2024	De La Cruz, Sandra				\$10.00
	6 Contributor address; City; State; Zip Code		1		
	Dallas, TX 75220-3749	r			
	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Not Employe	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:)	An	nount of Contribution (\$)	
11/23/2024	De La Cruz, Sandra				\$10.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75220-3749				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Not Employe	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:_)	An	nount of Contribution (\$)	
12/12/2024	De La Cruz, Sandra				\$10.00
	Contributor address; City; State; Zip Code		·		
	Dallas, TX 75220-3749				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Not Employe	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:_	·)	An	nount of Contribution (\$)	
10/23/2024	DeWitt, John				\$103.75
	Contributor address; City; State; Zip Code		1		
	Addison, TX 75001-6675				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Executive		Coach-Net RV Motor Cl	lub		
Date	Full name of contributor out-of-state PAC (ID#:_)	An	nount of Contribution (\$)	
09/16/2024	Decker, Debra				\$250.00
	Contributor address; City; State; Zip Code				
	Dallas, TX 75205-2914				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Consultant		Self employed			

The Inst	ruction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 28/120 Rpt: 32/199	
2 FILER NAM	IE		3 Filer ID (Ethics Commission Filers	s)
Johnson,	Nathan M. (The Honorable)		00081605	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
10/07/202	4 Dee, Michael		\$10	00.00
	6 Contributor address; City; State; Zip Code			
	Dallas, TX 75205-3921			
8 Principal oc	cupation / Job title (See Instructions)	9 Employer (See Instructions	3)	
Not Emplo	yed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/15/202			\$2	25.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75214-3323	i		
-	cupation / Job title (See Instructions)	Employer (See Instructions	3)	
Non-Profit	Executive	Good Reason Houston		
Date)	Amount of Contribution (\$)	
10/13/202	4 Dickenson, Gail		\$5	50.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75225-7401			
Principal or	cupation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Attorney		Self employed	<i>,</i>	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/04/202)		25.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75234-6568			
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	3)	
Not Emplo	yed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/22/202	4 Dion, Shannon		\$10	00.00
	Contributor address; City; State; Zip Code			
	Carrollton, TX 75006-5209			
-	cupation / Job title (See Instructions)	Employer (See Instructions	3)	
Not Emplo	уеа	Not Employed		

	The Instruction Guide explains how to complete this form.			1	1 Total pages Schedule A1: Sch: 29/120 Rpt: 33/199		
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)	
	Johnson, Na	than M. (The Honorable)			00081605		
4	Date	5 Full name of contributor Out-of-state PAC (ID#)	7	Amount of Contribution (\$)		
	12/13/2024	Dobbie, Gary				\$2,500.00	
		6 Contributor address; City; State; Zip Code					
		Dallas, TX 75230-5106					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	President		Wright Titus Agency				
	Date	Full name of contributor out-of-state PAC (ID#	· :)		Amount of Contribution (\$)		
	10/04/2024	Dooley, Winifred				\$500.00	
		Contributor address; City; State; Zip Code		1			
		Burbank, CA 91505-4005					
		pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Writer		Winifred Dooley				
	Date	—)		Amount of Contribution (\$)		
	10/13/2024	Dooley, Winifred				\$250.00	
		Contributor address; City; State; Zip Code					
		Burbank, CA 91505-4005					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)			
	Writer		Winifred Dooley	,			
	Date	Full name of contributor Out-of-state PAC (ID#	<u> </u>	Г	Amount of Contribution (\$)		
	08/21/2024	Dore, Stacey)		/ou.ii. or oonunzuuon (+)	\$1,500.00	
		Contributor address; City; State; Zip Code		ł		. ,	
		· · · · · · · · · · · · · · · · · · ·					
		Dallas, TX 75230-3635					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Attorney		Hunt Utility Services				
	Date	Full name of contributor out-of-state PAC (ID#)		Amount of Contribution (\$)		
	07/19/2024	Downs, Carol Lee				\$200.00	
		Contributor address; City; State; Zip Code		1			
	<u> </u>	Dallas, TX 75229-6626		Ĺ			
		pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Not Employe	eu	Not Employed				

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 30/120 Rpt: 34/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Johnson, Na	athan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC (ID#	t:)	7 Amount of Contribution (\$)
10/17/2024	Downs, John		\$100.00
	6 Contributor address; City; State; Zip Code		1
	Dallas, TX 75229-6626		
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)
Physician		US Oncology	
Date	Full name of contributor out-of-state PAC (ID#	±:)	Amount of Contribution (\$)
07/25/2024	Drablos, Kelly		\$25.00
	Contributor address; City; State; Zip Code		1
	Dallas, TX 75235-8234		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Not employe	¢d	Not employed	
Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)
08/25/2024	Drablos, Kelly		\$25.00
	Contributor address; City; State; Zip Code		1
	Dallas, TX 75235-8234		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Not employe	;d	Not employed	
Date	Full name of contributor out-of-state PAC (ID#	+:)	Amount of Contribution (\$)
09/25/2024	Drablos, Kelly		\$25.00
	Contributor address; City; State; Zip Code		1
	Dallas, TX 75235-8234		
	upation / Job title (See Instructions)	Employer (See Instructions	5)
Not employe	;d	Not employed	
Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)
10/25/2024	Drablos, Kelly		\$25.00
	Contributor address; City; State; Zip Code		1
	Dallas, TX 75235-8234		
-	ipation / Job title (See Instructions)	Employer (See Instructions	5)
Not employe	2d	Not employed	

The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 31/120 Rpt: 35/199	
2 FILER NAME			3	Filer ID (Ethics Commission	Filers)
Johnson, Nathan M. (The Honorable)				00081605	
4 Date	e 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	
10/21/2024	024 Drumm, Ann McDonald				\$50.00
	6 Contributor address; City; State; Zip Code		1		
	Dallas, TX 75204-2660				
	Principal occupation / Job title (See Instructions) 9 Employer (See Instruction		s)		_
Not Employe	Not Employed Not Employed				
Date	Full name of contributor out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
07/24/2024	7/24/2024 Duke, Dianne				\$40.00
	Contributor address; City; State; Zip Code		1		
	Mesquite, TX 75149-6863				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Not Employe	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
08/24/2024					\$40.00
	Contributor address; City; State; Zip Code				
	Mesquite, TX 75149-6863				
	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Not Employe	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
09/24/2024	Duke, Dianne				\$40.00
l	Contributor address; City; State; Zip Code		1		
1					
1					
	Mesquite, TX 75149-6863				
	upation / Job title (See Instructions)	Employer (See Instructions	S)		
Not Employe	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
10/24/2024	Duke, Dianne				\$40.00
1	Contributor address; City; State; Zip Code		1		
l					
1					
	Mesquite, TX 75149-6863				
Principal occupation / Job title (See Instructions)		Employer (See Instructions	s)		
Not Employed		Not Employed			

The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 32/120 Rpt: 36/199		
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		hnson, Nathan M. (The Honorable)			00081605	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/24/2024	Duke, Dianne				\$40.00
		6 Contributor address; City; State; Zip Code		1		
		Mesquite, TX 75149-6863				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employed Not Employed					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/27/2024	Elevation Management LLC				\$250.00
		Dallas, TX 75248-6300				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ເ</u>		
				-)		
	Date	Full name of contributor X out-of-state PAC (ID#: C	00082792)		Amount of Contribution (\$)	
	10/15/2024	Eli Lilly and Company Political Action Committee				\$1,500.00
		Contributor address; City; State; Zip Code				
		Indianapolis, IN 46285-0001				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date	Full name of contributor X out-of-state PAC (ID#: C)		Amount of Contribution (\$)	
	10/15/2024	Employees of Raytheon Technologies Corporati				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Arlington, VA 22209-3914				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/15/2024	English, Ryan				\$100.00
		Contributor address; City; State; Zip Code				
		Richardson, TX 75080-1817				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	1 5)		
				,		

The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 33/120 Rpt: 37/199	
2 FILER NAME Johnson. Na	athan M. (The Honorable)		3	Filer ID (Ethics Commission 00081605	on Filers)
4 Date	· · ·)	╞		
4 Date 12/14/2024	5 Full name of contributor out-of-state PAC (ID#: Ennis, Carolyn		ľ	Amount of Contribution (\$)	\$50.00
	6 Contributor address; City; State; Zip Code		1		
	Dallas, TX 75229-2715				
8 Principal occu Not Employe	upation / Job title (See Instructions) ed	9 Employer (See Instructions Not Employed	3)		
Date	Full name of contributor X out-of-state PAC (ID#:	C00363879)	Γ	Amount of Contribution (\$)	
11/20/2024	Entergy Employees PAC				\$2,000.00
	Contributor address; City; State; Zip Code		1		
	Austin, TX 78701-2444				
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ال</u>		
1 1110-2011 0000			<i>.</i> ,		
Date	Full name of contributor X out-of-state PAC (ID#:	C00340455)	Γ	Amount of Contribution (\$)	
12/02/2024	Essential Utilities Inc PAC				\$1,500.00
	Contributor address; City; State; Zip Code		1		
	Bryn Mawr, PA 19010-3402				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)		
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
08/17/2024	Esteves, Maria				\$10.00
	Contributor address; City; State; Zip Code				
	Irving, TX 75063-8902				
	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Teacher		Christ the King School			
Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
11/27/2024	ExxonMobil Corporation Political Action Commit	ttee of Texas			\$1,000.00
	Contributor address; City; State; Zip Code				
	Irving, TX 75039-4202				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 34/120 Rpt: 38/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Johnson, Na	athan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/14/2024	- ,		\$10.00
	6 Contributor address; City; State; Zip Code		1
	El Paso, TX 79911-3008		
	upation / Job title (See Instructions)	9 Employer (See Instructions	5)
Not Employ		Not Employed	
Date	—)	Amount of Contribution (\$)
07/17/2024			\$250.00
	Contributor address; City; State; Zip Code]
- · · ·	Paris, TX 75462		
-	upation / Job title (See Instructions)	Employer (See Instructions	5)
Not Employ	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/10/2024	Ferrell, Marjorie		\$5.00
	Contributor address; City; State; Zip Code		1
	Austin, TX 78745-4925		
-	upation / Job title (See Instructions)	Employer (See Instructions	5)
Not Employ		Not Employed	
Date)	Amount of Contribution (\$)
08/25/2024	Fine, Bob		\$500.00
	Contributor address; City; State; Zip Code		
	Dollar TV 75005 2020		
Dringingloog	Dallas, TX 75205-2830		
Principal occu Physician	upation / Job title (See Instructions)	Employer (See Instructions Baylor Scott and White	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/23/2024			\$100.00
	Contributor address; City; State; Zip Code		
	Corrollton TV 75006 4061		
	Carrollton, TX 75006-4061		
	upation / Job title (See Instructions)	Employer (See Instructions	5)
Not Employ		Not Employed	

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 35/120 Rpt: 39/199	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Johnson, Na	than M. (The Honorable)			00081605	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/14/2024	Fleming, Delryn				\$100.00
		6 Contributor address; City; State; Zip Code		1		
	Duin air al a sur	Carrollton, TX 75006-4061				
ð	Not Employe	pation / Job title (See Instructions)	9 Employer (See Instructions Not Employed	5)		
	Date)		Amount of Contribution (\$)	+=====
	10/15/2024					\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701-2430				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Philipal Occu			5)		
╞				_		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	¢1 500 00
	10/15/2024					\$1,500.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75201-3340				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ج)		
	i illopal occa			-)		
⊨	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Г	Amount of Contribution (\$)	
	12/14/2024	Foster, Russ)			\$25.00
		Contributor address; City; State; Zip Code		ł		+20100
		Dallas, TX 75231-4037				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed .	Not Employed			
╞	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/06/2024	Foxman, Jeana				\$180.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75214-4241				
\square		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
			•			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 36/120 Rpt: 40/199	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Johnson, Na	than M. (The Honorable)			00081605	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/13/2024	Friends of The University PAC				\$2,500.00
		6 Contributor address; City; State; Zip Code		1		
		Austin, TX 78763-0552				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/13/2024	Friends of UT Southwestern Medical Center				\$1,000.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75230-1330				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/15/2024	Friends of UT-Dallas PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75240-6387				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
				_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/27/2024	GEICO Texas PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Washington, DC 20076-0003				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Fincipal occu)		
	Data			<u> </u>	Amount of Contribution (f)	
	Date 10/13/2024	Full name of contributor out-of-state PAC (ID#:_ Garland, David)		Amount of Contribution (\$)	\$10.00
	10/13/2024					Φ10.00
		Contributor address; City; State; Zip Code				
		Minneapolis, MN 55407-2311				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	1 5)		
	Not Employe		Not Employed	,		
	. ,					

The Instru	action Guide explains how to complete th	nis form.	1 Total pages Schedule A1: Sch: 37/120 Rpt: 41/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	- athan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of Contribution (\$)
09/16/2024			\$50.00
	6 Contributor address; City; State; Zip Code		1
	Dallas, TX 75214-3555		
	upation / Job title (See Instructions)	9 Employer (See Instructions	5)
Not Employ	ed	Not Employed	
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of Contribution (\$)
12/14/2024			\$250.00
	Contributor address; City; State; Zip Code		4
	Dallas, TX 75244-6741		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	s)
Not Employ	ed	Not Employed	
Date	Full name of contributor X out-of-state PAC ((ID#: C00199257)	Amount of Contribution (\$)
12/02/2024	—		\$1,000.00
	Contributor address; City; State; Zip Code		A
	South San Francisco, CA 94080-4918		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	s)
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of Contribution (\$)
12/14/2024			\$250.00
	Contributor address; City; State; Zip Code		4
	Austin, TX 78703-1962		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	s)
Not Employ	ed	Not Employed	
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of Contribution (\$)
09/08/2024			\$500.00
	Contributor address; City; State; Zip Code		4
	Dallas, TX 75219-2134		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Not Employ		Not Employed	
		I	

	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 38/120 Rpt: 42/199	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Johnson, Nathan M. (The Honorable)				00081605	
4	Date	5 Full name of contributor out-of-state PAC (I	D#:)	7	Amount of Contribution (\$)	
	08/21/2024	Germania Farm Mutual Political Action Com				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Brenham, TX 77834-0645				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (I	D#:)	Т	Amount of Contribution (\$)	
	12/13/2024	Gibbs, Delbert				\$25.00
		Contributor address; City; State; Zip Code		·		
		Dallas, TX 75238-3735				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney		Delbert Gibbs			
	Date	Full name of contributor out-of-state PAC (I	D#:)	Т	Amount of Contribution (\$)	
	10/17/2024	Gifford, Barbara				\$5.00
		Contributor address; City; State; Zip Code		·		
		Silver Spring, MD 20906-5809				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor 🛛 out-of-state PAC (I	D#:)		Amount of Contribution (\$)	
	10/18/2024	Gifford, Barbara				\$25.00
		Contributor address; City; State; Zip Code				
		Silver Spring, MD 20906-5809				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor 🛛 out-of-state PAC (I	D#:)	Γ	Amount of Contribution (\$)	
	10/18/2024	Gifford, Barbara				\$25.00
		Contributor address; City; State; Zip Code		"		
		Silver Spring, MD 20906-5809				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 39/120 Rpt: 43/199	
2 FILER NAME			3 Filer ID (Ethics Commission Filers))
Johnson, Na	athan M. (The Honorable)		00081605	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
07/06/2024	Gilmore, Nancy		\$25	<i>.</i> 00
	6 Contributor address; City; State; Zip Code			
	Richardson, TX 75080-5114	I		
	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/23/2024	Gilmore, Nancy		\$10).00
	Contributor address; City; State; Zip Code			
	Richardson, TX 75080-5114			
	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/27/2024	Gilmore, Nancy		\$10).00
	Contributor address; City; State; Zip Code			
	Richardson, TX 75080-5114		<u> </u>	
Retired	ipation / Job title (See Instructions)	Employer (See Instructions Retired	5)	
Retileu			1	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/21/2024	Gist, Raymond		\$100	1.00
	Contributor address; City; State; Zip Code			
	Grand Blanc, MI 48439-9563			
Drinoinal agai		Employer (See Instructions	<u> </u>	
Fincipal occu	ipation / Job title (See Instructions)	Employer (See Instructions	>/	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	000
07/01/2024	Glaser, Marnie		\$250	.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75205-1063			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)	
Not Employe		Not Employed	·,	

The Instru	ction Guide explains how to complete this	; form.	1 Total pages Schedule A1: Sch: 40/120 Rpt: 44/199	
2 FILER NAME			3 Filer ID (Ethics Commission I	Filers)
Johnson, Na	athan M. (The Honorable)		00081605	
4 Date	5 Full name of contributor out-of-state PAC (IDa	#:) 7	7 Amount of Contribution (\$)	
07/31/2024	Glatz, Derek			\$25.00
	6 Contributor address; City; State; Zip Code			
	Carrollton, TX 75006-1702			
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
Customer Ex	xperience Analyst	GM Financial		
Date	Full name of contributor out-of-state PAC (ID;	#:)	Amount of Contribution (\$)	
08/31/2024	Glatz, Derek			\$15.00
	Contributor address; City; State; Zip Code			
	Carrollton, TX 75006-1702			
-	ipation / Job title (See Instructions)	Employer (See Instructions)		
Customer Ex	xperience Analyst	GM Financial		
Date	Full name of contributor out-of-state PAC (ID;	#:)	Amount of Contribution (\$)	
10/27/2024	Glatz, Derek			\$25.00
	Contributor address; City; State; Zip Code			
	Carrollton, TX 75006-1702			
	Ipation / Job title (See Instructions)	Employer (See Instructions)		
Customer E	xperience Analyst	GM Financial		
Date		#:)	Amount of Contribution (\$)	_
07/26/2024	Goldfine, Steven			\$25.00
	Contributor address; City; State; Zip Code			
Dringinglaggy	Dallas, TX 75230-3635			
-	<pre>upation / Job title (See Instructions) ad</pre>	Employer (See Instructions)		
Not Employe		Not Employed		
Date	Full name of contributor Out-of-state PAC (ID)	#:)	Amount of Contribution (\$)	***** **
10/05/2024	Goldstein, Scott			\$259.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75238-1621			
Dringing occu		Employer (Soo Instructions)		
Communicat	Ipation / Job title (See Instructions)	Employer (See Instructions) The GoldHam Group		
Communica				
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	The Instru	ction Guide explains how to comple	te this fo	orm.	1	Total pages Schedule A1: Sch: 41/120 Rpt: 45/199	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		athan M. (The Honorable)				00081605	
4	Date	5 Full name of contributor out-of-state	PAC (ID#:)	7	Amount of Contribution (\$)	
	10/12/2024	Gordon, Sydna					\$50.00
		6 Contributor address; City; State; Zip Code					
		1					
		Garland, TX 75044-2722	,				
8		upation / Job title (See Instructions)		9 Employer (See Instructions)			
	Attorney			Perdue Brandon Fielder	<u> </u>	ollins & Mott	
	Date		• PAC (ID#:)		Amount of Contribution (\$)	
	07/10/2024	Goyne, Roderick					\$50.00
		Contributor address; City; State; Zip Code					
		Dallas, TX 75225-7003	,				
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions))		
Γ	Date	Full name of contributor out-of-state	PAC (ID#:)		Amount of Contribution (\$)	
	12/02/2024	Grant, Kathy					\$1,000.00
		Contributor address; City; State; Zip Code					
		1					
		Austin, TX 78704-4131	,				
		upation / Job title (See Instructions)		Employer (See Instructions)			
	Owner			Kathy Grant Group LLC			
Γ	Date	Full name of contributor out-of-state	• PAC (ID#:)		Amount of Contribution (\$)	
	10/15/2024	Green, Rhonda					\$25.00
		Contributor address; City; State; Zip Code					
	<u> </u>	Dallas, TX 75214-1673			Ļ		
		upation / Job title (See Instructions)		Employer (See Instructions))		
	Not Employe			Not Employed	_		
	Date	Full name of contributor out-of-state	; PAC (ID#:)		Amount of Contribution (\$)	
	10/04/2024	Gross, Robert					\$500.00
		Contributor address; City; State; Zip Code					
		1					
		Dallas, TX 75209-5619					
		upation / Job title (See Instructions)		Employer (See Instructions)			
	Physician			Children's Eye Specialis	ts	PA	
Γ							

The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 42/120 Rpt: 46/199	
2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	athan M. (The Honorable)			00081605	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
10/15/2024	HCA Texas Good Government Fund				\$1,000.00
	6 Contributor address; City; State; Zip Code				
	Austin, TX 78701-4082				
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
10/15/2024	HMWK LLC				\$250.00
	Contributor address; City; State; Zip Code		1		
	A				
Dringing ago	Austin, TX 78701-1810				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
			-	the state of the s	
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	*1 000 00
11/20/2024	HS Law PAC				\$1,000.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78701-1696				
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	1 5)		
Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
12/14/2024	Hadden, Scott				\$100.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75238-3355				
	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
Film produce	ər	Self employed			
Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
08/21/2024	Halla, Marilyn				\$250.00
	Contributor address; City; State; Zip Code				
	Dallas, TX 75229-3958				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
volunteer		NA	>)		
Volunteer					

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 43/120 Rpt: 47/199	
2	FILER NAME Johnson, Na	than M. (The Honorable)		3	Filer ID (Ethics Commission 00081605	ו Filers)
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
-	07/31/2024	Harbeck, Hope E	/	ľ	Allount of Contribution (4)	\$50.00
	0	6 Contributor address; City; State; Zip Code		$\left \right $		+
		Dallas, TX 75243-6304				
8	Principal occu Not Employe		9 Employer (See Instructions Not Employed	;)		
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	12/14/2024	Harbeck, Hope E				\$100.00
		Contributor address; City; State; Zip Code				
		1				
		Dallas, TX 75243-6304				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Not Employe	,d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/14/2024	Harris, Jonathan				\$25.00
		Contributor address; City; State; Zip Code		1		
		Cambridge, MA 02139-1002				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
L	Not Employe	d	Not Employed	_		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/17/2024	Hartig, Cheryle]		\$5.00
		Contributor address; City; State; Zip Code				
		1				
		Dallas, TX 75206-6317				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Interior desig	jner	Self employed			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/20/2024	Hausenfluck, Amber				\$500.00
		Contributor address; City; State; Zip Code		1		
		1				
		Austin, TX 78704-1060				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
\square						

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 44/120 Rpt: 48/199	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		than M. (The Honorable)			00081605	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/27/2024	Health Care Service Corporation Employees' PA				\$2,000.00
		6 Contributor address; City; State; Zip Code		1		
Ļ		Chicago, IL 60601-5014	<u>1 </u>	L		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
╞				1		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢10.00
	07/04/2024					\$10.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75238-3756				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed .	Not Employed			
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/14/2024	Hebley, Sandi				\$10.00
		Contributor address; City; State; Zip Code		1		
L	Drive sized apout	Dallas, TX 75251-2344		Ĺ		
	Principal occu RN LMSW	pation / Job title (See Instructions)	Employer (See Instructions Faith Presbyterian Hosp		2	
╞				T		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	<u>ቀ10 00</u>
	08/14/2024	Hebley, Sandi				\$10.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75251-2344				
┢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	RN LMSW		Faith Presbyterian Hosp	oice	è	
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/14/2024	Hebley, Sandi				\$10.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75251-2344	<u>1 </u>	L		
		pation / Job title (See Instructions)	Employer (See Instructions			
	RN LMSW		Faith Presbyterian Hosp		2	

Th	ne Instru	ction Guide explains how to complete this f	orm.	1 Total pages Sche Sch: 45/120 Rp		
2 FIL	ER NAME			3 Filer ID (Ethics	Commissio	on Filers)
		than M. (The Honorable)		00081605	Commodel	
4 Dat	ite	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contri	bution (\$)	
10/	/14/2024	Hebley, Sandi				\$10.00
		6 Contributor address; City; State; Zip Code				
		· · · · · · · · · · · · · · · · · · ·				
		Dallas, TX 75251-2344				
8 Prir	ncipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
RN	I LMSW		Faith Presbyterian Hosp	lice		
Dat	ite	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contri	bution (\$)	
11/	/14/2024	Hebley, Sandi				\$10.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75251-2344				
Prir	ncipal occu	I pation / Job title (See Instructions)	Employer (See Instructions	.)		
	NLMSW		Faith Presbyterian Hosp			
Dat	to	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contri	hution (\$)	
	/14/2024	Hebley, Sandi)	Amount of Contin	bution (\$)	\$10.00
12/	14/2024	-				Φ10.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75251-2344				
Prir	ncinal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	LMSW		Faith Presbyterian Hosp			
					huding (A)	
Dat		—)	Amount of Contri	Dution (\$)	¢100.00
077	/31/2024	Helton, Linda				\$100.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75214-3522				
Prir	ncipal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	ot Employe		Not Employed	,		
				Amount of Contri	bution (ft)	
Dat	/04/2024	Full name of contributor out-of-state PAC (ID#: Hendrix, Michael)	Amount of Contri	bulion (⊅)	\$1,000.00
12/	/04/2024					φ1,000.00
		Contributor address; City; State; Zip Code				
		Irving, TX 75061-2130				
Driv	ncinal coorr	-	Employer (See Instruction			
		pation / Job title (See Instructions) Manufacturing Engineer	Employer (See Instructions Qarbon Aerospace	7		
	mposites		Qainon Aerospace			

The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A1: Sch: 46/120 Rpt: 50/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	athan M. (The Honorable)		00081605
4 Date	5 Full name of contributor Out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/18/2024	Henley, Donald		\$500.0
	6 Contributor address; City; State; Zip Code		
	Charlottesville, VA 22903-4584		
-	upation / Job title (See Instructions)	9 Employer (See Instructions	5)
Professional	musician	Self	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/20/2024	Henry, LaRue H		\$100.0
	Contributor address; City; State; Zip Code		
	Dallas, TX 75209-2021		
-	upation / Job title (See Instructions)	Employer (See Instructions	
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/13/2024	Henry, LaRue H		\$100.0
	Contributor address; City; State; Zip Code		
	Dallas, TX 75209-2021		
	ipation / Job title (See Instructions)	Employer (See Instructions	;)
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/12/2024	Hensley, Jane		\$10.0
	Contributor address; City; State; Zip Code		
D in single and	Taylor, TX 76574-2370		
-	ipation / Job title (See Instructions)	Employer (See Instructions	•)
Attorney		State of Texas	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/04/2024	Herman, Stewart		\$10.0
	Contributor address; City; State; Zip Code		
	Missochalia MNLEE40E 22E2		
Deirseineleen	Minneapolis, MN 55405-3253		<u> </u>
-	Ipation / Job title (See Instructions)	Employer (See Instructions	•)
Not Employe	30	Not Employed	

The Instruc	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 47/120 Rpt: 51/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	athan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7 Amount of Contribution (\$)
11/27/2024	Herndon, Floyd		\$10.00
	6 Contributor address; City; State; Zip Code		
C. D. Linetara	Dallas, TX 75230-1962		L
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions))
Date	Full name of contributor out-of-state PAC (ID#:	<u>الا</u>	Amount of Contribution (\$)
10/18/2024	Hill, Keisha		\$25.00
1	Contributor address; City; State; Zip Code		
- : : .1	Dallas, TX 75229-3958		L
	ipation / Job title (See Instructions)	Employer (See Instructions))
Event Manag	-	DAPS	
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
11/20/2024	Hillco PAC		\$2,500.00
	Contributor address; City; State; Zip Code		
	Austin, TX 78701-2458		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
· · ·			,
Date	Full name of contributor out-of-state PAC (ID#:	······)	Amount of Contribution (\$)
07/23/2024	Hillis, Jeffery		\$20.00
	Contributor address; City; State; Zip Code		
	Farmers Branch, TX 75234-5207		
Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions))
Not Employe		Not Employed)
Date			Amount of Contribution (\$)
08/23/2024	Full name of contributor out-of-state PAC (ID#: Hillis, Jeffery	:/	\$20.00
00,20,202	Contributor address; City; State; Zip Code		
	Continuation address, City, State, Zip Code		
	Farmers Branch, TX 75234-5207		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
Not Employe	ed	Not Employed	

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 48/120 Rpt: 52/199	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Johnson, Na	athan M. (The Honorable)			00081605	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/23/2024	Hillis, Jeffery				\$20.00
		6 Contributor address; City; State; Zip Code		1		
		Farmers Branch, TX 75234-5207				
8	Principal occu	1	9 Employer (See Instructions	上 3)		
	Not Employe	ed I	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/23/2024	Hillis, Jeffery				\$20.00
		Contributor address; City; State; Zip Code				
		1				
<u> </u>		Farmers Branch, TX 75234-5207				
		ipation / Job title (See Instructions)	Employer (See Instructions	;)		
_	Not Employe		Not Employed	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/01/2024	Hodge, Nancy				\$50.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75220-3916				
<u> </u>	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Not employe		Not employed	')		
—	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/17/2024	Hogsett, Sally			Amount of Continuation (+)	\$100.00
	••••	Contributor address; City; State; Zip Code				
		1				
		Danville, IL 61832-1371				
	•	ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	Not Employe	;d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/27/2024	Holland & Knight Texas PAC				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		1				
		Dallas, TX 75201-2532				
	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	L 3		
	Finopa ocoa			'n		
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The Instr	ruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 49/120 Rpt: 53/199
2 FILER NAM	 IE		3 Filer ID (Ethics Commission Filers)
Johnson, I	Nathan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
08/30/2024			\$50.
	6 Contributor address; City; State; Zip Code		
	Dallas, TX 75206-5832		
	cupation / Job title (See Instructions)	9 Employer (See Instructions	»)
Not Emplo	yed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
11/27/2024			\$1,000.
	Contributor address; City; State; Zip Code		
	Richardson, TX 75082-3252		
Principal oc	cupation / Job title (See Instructions)	Employer (See Instructions	
CEO		Hood Global Investment	t Holdings
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)
09/04/2024			\$100.
	Contributor address; City; State; Zip Code		
	Dallas, TX 75229-5233		
	cupation / Job title (See Instructions)	Employer (See Instructions	\$)
Not Emplo	yed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/14/2024	4 Hope, Holly		\$50.
	Contributor address; City; State; Zip Code		1
= · · · · · · · · ·	Dallas, TX 75229-5233		
	cupation / Job title (See Instructions)	Employer (See Instructions	;)
Not Emplo	yed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/14/2024	4 Hopkins, Shelton		\$25.
	Contributor address; City; State; Zip Code		
	Dallas TV 75990 4919		
Duincipal co	Dallas, TX 75229-4212		<u> </u>
	cupation / Job title (See Instructions)	Employer (See Instructions	;)
Not Emplo	yea	Not Employed	
		1	

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	The Instru	ction Guide explains how to com	nplete this fo	orm.	1	Total pages Schedule A1: Sch: 50/120 Rpt: 54/199	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		athan M. (The Honorable)				00081605	
4	Date	5 Full name of contributor out-of	f-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/02/2024	Horton, Marilyn					\$20.00
		6 Contributor address; City; State; Zip C					
		Dallas, TX 75214-3445					
8		upation / Job title (See Instructions)		9 Employer (See Instructions)		
	Doctor			Oak Street Health			
F	Date	Full name of contributor out-of	f-state PAC (ID#:)		Amount of Contribution (\$)	
	08/02/2024	Horton, Marilyn					\$20.00
		Contributor address; City; State; Zip C					
		Dallas, TX 75214-3445					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions)		
	Doctor			Oak Street Health			
F	Date	Full name of contributor out-of)		Amount of Contribution (\$)	
	09/02/2024	Horton, Marilyn					\$20.00
		Contributor address; City; State; Zip C					
		Dallas, TX 75214-3445					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions)		
	Doctor			Oak Street Health			
	Date	Full name of contributor	f-state PAC (ID#:)		Amount of Contribution (\$)	
	10/02/2024	Horton, Marilyn					\$20.00
		Contributor address; City; State; Zip C					
		Dallas, TX 75214-3445					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions)		
	Doctor			Oak Street Health			
	Date	Full name of contributor 🔲 out-of	f-state PAC (ID#:)		Amount of Contribution (\$)	
	11/02/2024	Horton, Marilyn					\$20.00
		Contributor address; City; State; Zip C					
		Dallas, TX 75214-3445					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions)		
	Doctor			Oak Street Health			
Í							

	The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 51/120 Rpt: 55/199
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
-		athan M. (The Honorable)		00081605
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	12/02/2024	Horton, Marilyn		\$20.00
		6 Contributor address; City; State; Zip Code		1
		Dallas, TX 75214-3445		
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)
	Doctor		Oak Street Health	
	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
	11/27/2024	Houston Police Retired Officers Association PA		\$1,000.00
		Contributor address; City; State; Zip Code		4
		Houston, TX 77219-0787		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
	Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
	12/02/2024	Howard Energy Partners PAC		\$2,000.00
		Contributor address; City; State; Zip Code		
		San Antonio, TX 78256-2452		
	Principal occu	Lupation / Job title (See Instructions)	Employer (See Instructions	Js)
	-	· ·		
⊨	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>)	Amount of Contribution (\$)
	08/14/2024	Howard, Janet	/	\$10.00
		Contributor address; City; State; Zip Code		
		Richardson, TX 75081-4453		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
	Not Employe		Not Employed	
	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>)	Amount of Contribution (\$)
	09/16/2024	Howard, Janet	/	\$25.00
		Contributor address; City; State; Zip Code		
		Richardson, TX 75081-4453		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
	Not Employe		Not Employed	-,

The Instru	uction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 52/120 Rpt: 56/199	
2 FILER NAM	Ē		3 Filer ID (Ethics Commission File	ers)
Johnson, N	lathan M. (The Honorable)		00081605	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/20/2024	Howard, Janet		\$	\$10.00
	6 Contributor address; City; State; Zip Code			
	Richardson, TX 75081-4453			
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions)	
Not Employ		Not Employed		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/13/2024		/		510.00
	Richardson, TX 75081-4453			
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions)	
Not Employ	/ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/20/2024	Howard, Janet		\$	510.00
	Contributor address; City; State; Zip Code			
	Disk subset TV 75001 4450			
Driveirellere	Richardson, TX 75081-4453		<u></u>	
Not Employ	cupation / Job title (See Instructions)	Employer (See Instructions) Not Employed)	
Date	— —)	Amount of Contribution (\$)	10.00
12/13/2024			\$	610.00
	Contributor address; City; State; Zip Code			
	Richardson, TX 75081-4453			
Principal occ	L supation / Job title (See Instructions)	Employer (See Instructions)	
Not Employ	ved	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/14/2024	— —			\$10.00
	Contributor address; City; State; Zip Code			
	Richardson, TX 75081-4453			
-	supation / Job title (See Instructions)	Employer (See Instructions)	
Not Employ	/ed	Not Employed		

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 53/120 Rpt: 57/199	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Johnson, Na	athan M. (The Honorable)			00081605	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/27/2024	Hughes, Christopher				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		1				
	<u> </u>	Austin, TX 78701-4050				
	Principal occu Attorney	upation / Job title (See Instructions)	9 Employer (See Instructions Husch Blackwell	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/13/2024	Hughes, Christopher				\$1,000.00
		Contributor address; City; State; Zip Code				
		1				
		Austin, TX 78701-4050				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ار</u> ۱		
	Attorney		Husch Blackwell	'		
	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	08/14/2024	Hughes, Lannie	/		Allount of Contribution (+)	\$100.00
		Contributor address; City; State; Zip Code				•
		Dallas, TX 75254-8006				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Not Employe	be	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/14/2024	Hughes, Lannie				\$100.00
		Contributor address; City; State; Zip Code				
		1				
	D.1. datal asso	Dallas, TX 75254-8006		Ĺ		
	Not Employe	upation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)		
			· · ·	_	(۵) (۵)	
	Date 12/02/2024	Full name of contributor x out-of-state PAC (ID#: <u>C</u> Humana Inc. Political Action Committee	.002/100/)		Amount of Contribution (\$)	\$1,000.00
	12/02/2024	Contributor address; City; State; Zip Code				Φ1,000.00
		Contributor address, City, State, Zip Code				
		1				
		Louisville, KY 40202-2946				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 54/120 Rpt: 58/199	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Johnson, Na	athan M. (The Honorable)			00081605	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/04/2024	Ikemba, Catherine				\$20.85
	ł	6 Contributor address; City; State; Zip Code		1		
	I					
	l					
Ļ	Drinsipal appr	Dallas, TX 75218-4503	Contractions			
ð	Principal occu Physician	ipation / Job title (See Instructions)	9 Employer (See Instructions UT Southwestern	5)		
⊨	-			.		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	#20.0E
	08/04/2024	Ikemba, Catherine				\$20.85
	I	Contributor address; City; State; Zip Code				
	I					
	I	Dallas, TX 75218-4503				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ו		
	Physician		UT Southwestern	,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:_		Γ	Amount of Contribution (\$)	
	09/04/2024	Ikemba, Catherine	/			\$20.85
	0010-1202	Contributor address; City; State; Zip Code				Ψ20.00
	I	Culturbutor audress, City, State, Lip Code				
	I					
	I	Dallas, TX 75218-4503				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Physician		UT Southwestern			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/04/2024	Ikemba, Catherine				\$20.85
	I	Contributor address; City; State; Zip Code		1		
	I					
	l					
┡	Dringinglogg	Dallas, TX 75218-4503	Employer (Cool Instructions			
	Principal occu Physician	ipation / Job title (See Instructions)	Employer (See Instructions UT Southwestern	5)		
╘	-			-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 20.05
	11/04/2024	Ikemba, Catherine				\$20.85
	l	Contributor address; City; State; Zip Code				
	I					
	I	Dallas, TX 75218-4503				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ג)		
	Physician		UT Southwestern	-,		
┝			-			

The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 55/120 Rpt: 59/199	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	athan M. (The Honorable)		00081605	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
12/04/2024	,			\$20.85
	6 Contributor address; City; State; Zip Code		•	
	Dallas, TX 75218-4503			
8 Principal occu Physician	upation / Job title (See Instructions)	9 Employer (See Instructions UT Southwestern	3)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/13/2024	· ·		\$	\$2,000.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701-2185			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	6)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
12/13/2024		C		\$750.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701-2415			
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	5)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/15/2024	Irvin, Kathleen			\$1,000.00
	Contributor address; City; State; Zip Code			,
	Dallas, TX 75214-2253			
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	5)	
Attorney		Law Office of Kathleen I	Emmer Irvin	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
11/27/2024	Irving Professional Fire Fighters PAC		\$	51,500.00
	Contributor address; City; State; Zip Code			
	Irving, TX 75017-1057			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)	

The Instruction Guide explains	now to complete this f	orm.	1 Total pages Sch: 56/12	Schedule A1: 20 Rpt: 60/199	
2 FILER NAME				- Ethics Commissi	
Johnson, Nathan M. (The Honorable)			00081605		,
4 Date 5 Full name of contributor	out-of-state PAC (ID#:_)	7 Amount of C	Contribution (\$)	
11/27/2024 Isett, Carl					\$250.00
6 Contributor address; Cir	ty; State; Zip Code				
	202				
Lubbock, TX 79424-1		Employer (See Instructions)		
8 Principal occupation / Job title (See Instruc	lions)	9 Employer (See Instructions)		
Date Full name of contributor	X out-of-state PAC (ID#:	С00128512)	Amount of C	Contribution (\$)	
10/15/2024 JP Morgan Chase & 0	Co. PAC				\$2,000.00
Contributor address; Cit	ty; State; Zip Code				
Washington DC 2000	NE 2221				
Washington, DC 2000 Principal occupation / Job title (See Instruc		Employer (See Instructions)		
)		
Date Full name of contributor	out-of-state PAC (ID#:_	<u> </u>	Amount of C	Contribution (\$)	
12/14/2024 Jablonski, Carol Ann	—				\$100.00
Contributor address; Cir	y; State; Zip Code				
	_				
Dallas, TX 75248-131			<u> </u>		
Principal occupation / Job title (See Instruc Not Employed	tions)	Employer (See Instructions Not Employed)		
Date Full name of contributor 07/04/2024 Jagoda, Jo	out-of-state PAC (ID#:_)	Amount of C	Contribution (\$)	\$50.00
	hu Stata, Zia Cada				\$ <u>50.00</u>
Contributor address; Cit	ly; State; Zip Code				
Dallas, TX 75230-420	1				
Principal occupation / Job title (See Instruc	tions)	Employer (See Instructions)		
Independent Investor		Jo Kurth Jagoda			
Date Full name of contributor	out-of-state PAC (ID#:_)	Amount of C	Contribution (\$)	
08/17/2024 Jagoda, Jo					\$20.00
Contributor address; Cit	y; State; Zip Code				
Dallas, TX 75230-420	11				
Principal occupation / Job title (See Instruc		Employer (See Instructions)		
Independent Investor		Jo Kurth Jagoda	1		

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1:	
	· · ·		Sch: 57/120 Rpt: 61/199	
2 FILER NAME			3 Filer ID (Ethics Commission 00081605	Filers)
	athan M. (The Honorable)			
4 Date 12/13/2024	5 Full name of contributor out-of-state PAC (ID#: Jocelyn Dabeau Government Affairs)	7 Amount of Contribution (\$)	\$300.00
12/13/2024	-			\$300.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78731-6134			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
07/01/2024	Johnson, Anne			\$50.00
	Contributor address; City; State; Zip Code			
<u> </u>	Mesquite, TX 75149-8806		<u></u>	
Not Employ	upation / Job title (See Instructions)	Employer (See Instructions) Not Employed)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	¢E0.00
08/01/2024	Johnson, Anne			\$50.00
	Contributor address; City; State; Zip Code			
	Mesquite, TX 75149-8806			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Not Employ	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)	
10/15/2024	Johnson, Willis			\$250.00
	Contributor address; City; State; Zip Code			
Dringinglagg	Dallas, TX 75215-1811 upation / Job title (See Instructions)	Employer (See Instructions)	N	
CEO		WAI-WIZE LLP)	
			Amount of Contribution (ft)	
Date 10/15/2024	Full name of contributor out-of-state PAC (ID#: Jones, Blake)	Amount of Contribution (\$)	\$100.00
10/13/2024	Contributor address; City; State; Zip Code			\$100.00
	Contributor address, City, State, Zip Code			
	Dallas, TX 75229-5263			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Attorney		BJONES PLLC		

			1 Total pages Cabadula A1
The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 58/120 Rpt: 62/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Johnson, Na	athan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
07/06/2024	Jones, Karen		\$10.
	6 Contributor address; City; State; Zip Code		
	Acton, CA 93510-0093		
	ipation / Job title (See Instructions)	9 Employer (See Instructions)
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/13/2024	Jordan, Anita		\$10.
	Contributor address; City; State; Zip Code		
	Dallas, TX 75243-6136		
-	ipation / Job title (See Instructions)	Employer (See Instructions	
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
11/04/2024	Kaja, Chandra Sekhar		\$100.
	Contributor address; City; State; Zip Code		
	Irving, TX 75038-2502		
-	ipation / Job title (See Instructions)	Employer (See Instructions	
Software		United IT	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/17/2024	Karp, Renee		\$50.
	Contributor address; City; State; Zip Code		
	Dallas, TX 75248-5047		
Bringinal occu	upation / Job title (See Instructions)	Employer (See Instructions	
Not Employe		Not Employed)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/10/2024	Karp, Renee and David		\$50.
	Contributor address; City; State; Zip Code		
	Dallas, TX 75248-5047		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)
Not Employe		Not Employed	,

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 59/120 Rpt: 63/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	than M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
12/02/2024	Keffer, James		\$1,000.00
	6 Contributor address; City; State; Zip Code		•
	Eastland, TX 76448-3450		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)
Consultant		Keffer Konsulting LLC	
Date	Full name of contributor out-of-state PAC (ID#:_	·)	Amount of Contribution (\$)
07/10/2024	Kelsey, Winifred		\$100.00
	Contributor address; City; State; Zip Code		•
	Houston, TX 77002-9531		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Not employe	d	Not employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/29/2024	Kelsey, Winifred		\$50.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77002-9531		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Not employe	d	Not employed	
Date	Full name of contributor out-of-state PAC (ID#:_	·)	Amount of Contribution (\$)
07/29/2024	Kelsey, Winifred		\$100.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77002-9531		
	pation / Job title (See Instructions)	Employer (See Instructions	5)
Not employe	d	Not employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/14/2024	Kendall, Karen		\$100.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75214-3041		
	pation / Job title (See Instructions)	Employer (See Instructions	5)
Not employe		Not employed	

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 60/120 Rpt: 64/199
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Johnson, Nathan M. (The Honorable)	00081605
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)
10/09/2024 Kendlehart, Philip	\$5.00
6 Contributor address; City; State; Zip Code	
Allen, TX 75002-5233	
8 Principal occupation / Job title (See Instructions) 9 Employer (S	
Not Employed Not Employ	yed
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
12/13/2024 Kickapoo Traditional Tribe of Texas Operating Account	\$2,500.00
Contributor address; City; State; Zip Code	
Eagle Pass, TX 78852-2503	
Principal occupation / Job title (See Instructions) Employer (S	See Instructions)
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
10/14/2024 Kline, J. Peter	\$1,000.00
Contributor address; City; State; Zip Code	
Dallas, TX 75225-3004	
	See Instructions)
Investments	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
07/01/2024 Krohn, Jim	\$25.00
Contributor address; City; State; Zip Code	
Dallas, TX 75230-3144	
	See Instructions)
Bank Supervision FDIC	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code	
Rowlett, TX 75088-5104	
	See Instructions)
School Librsrian Dallas ISD	

The Instru	ction Guide explains how to co	omplete this for	m.	1	Total pages Schedule A1: Sch: 61/120 Rpt: 65/199	
2 FILER NAME	2 FILER NAME		3	Filer ID (Ethics Commission	Filers)	
Johnson, Na	than M. (The Honorable)				00081605	,
4 Date	5 Full name of contributor out-o	-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
12/13/2024	Kull, Veda					\$25.00
	6 Contributor address; City; State; Zip			1		
	Rowlett, TX 75088-5104			Ļ		
	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
School Librs			Dallas ISD			
Date		-of-state PAC (ID#:)		Amount of Contribution (\$)	
07/03/2024	Lanphier, Marianne					\$10.00
	Contributor address; City; State; Zip	Code				
	Richardson, TX 75080-7207					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>।</u> इ)		
Not Employe	,		Not Employed	,		
Date	Full name of contributor	-of-state PAC (ID#:)		Amount of Contribution (\$)	
12/14/2024	Larcade, Margaret	01 State 1 7 10 (, and an or <u>e</u> e	\$10.00
		Code		1		
	San Antonio, TX 78212-3108					
	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Not Employe	;d 		Not Employed			
Date	Full name of contributor	-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
07/19/2024	Lawson, Gayle]		\$200.00
	Contributor address; City; State; Zip					
	Dallas, TX 75231-5320					
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ເ)		
Not Employe			Not Employed	-)		
Date		-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
10/14/2024	Lawson, Gayle)			\$50.00
	Contributor address; City; State; Zip	Code				
Dallas, TX 75231-5320						
	pation / Job title (See Instructions)		Employer (See Instructions	5)		
Not Employe	d		Not Employed			

	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedul Sch: 62/120 Rpt: 6	
2	FILER NAME			3 Filer ID (Ethics Co	
		athan M. (The Honorable)		00081605	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribut	ion (\$)
	11/13/2024	Lazarowicz, Katie			\$10.00
		6 Contributor address; City; State; Zip Code			
		Brooklyn, NY 11211-1573			
8			9 Employer (See Instructions)	
	Not Employe	ed	Not Employed		
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribut	ion (\$)
	07/02/2024	Leavitt, Jo			\$50.00
		Contributor address; City; State; Zip Code			
		Dallas, TX 75229-3703			
		pation / Job title (See Instructions)	Employer (See Instructions)	
	Not Employe	ed	Not Employed		
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribut	ion (\$)
	12/13/2024	Lee A. Woods Political Action Committee			\$1,000.00
		Contributor address; City; State; Zip Code			
		Austin, TX 78701-2133	/2		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribut	
	12/14/2024	Leighty, William			\$25.00
		Contributor address; City; State; Zip Code			
		Juneau, AK 99802-0993			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Not Employe		Not Employed	,	
	Date	Full name of contributor out-of-state PAC (ID#:	· · · · · · · · · · · · · · · · · · ·	Amount of Contribut	ion (\$)
	07/04/2024	Linden, Greg	,		\$40.00
	•	Contributor address; City; State; Zip Code			• -
		Oakland, CA 94602-3556			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Researcher		UC Berkeley		
4					

	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 63/120 Rpt: 67/199	
2	2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)	
		than M. (The Honorable)				00081605	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/15/2024	Linebarger Goggan Blair &	∠ Sampson LLP				\$1,500.00
		6 Contributor address; City; Sta	ate; Zip Code		1		
		Austin, TX 78760-7428					
8	Principal occu	pation / Job title (See Instructions)	1	9 Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/15/2024	Locke Lord LLP	—				\$1,000.00
		Contributor address; City; Sta					
		Houston, TX 77002-2914			Ĺ		
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	±4,000,00
	11/27/2024	Longbow Partners					\$1,000.00
		Contributor address; City; Sta	ate; Zip Code				
		Austin, TX 78701-1827					
	Principal occu	I pation / Job title (See Instructions))	Employer (See Instructions	1 5)		
╞	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/19/2024	Lowenberg, Julie Goldberg	g				\$25.00
		Contributor address; City; Sta	ate; Zip Code				
		Dallas, TX 75219-7809		/2	Ĺ		
		pation / Job title (See Instructions))	Employer (See Instructions	5)		
	Not Employe			Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	* 100.00
	12/14/2024	Lowenberg, Julie and Mich					\$100.00
		Contributor address; City; Sta	ate; Zip Code				
		Dallas, TX 75219-7809					
⊢	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	[5)		
	Not Employe			Not Employed	,		
⊢							

The Instru	ction Guide explains how to comple	te this form.	1 Total pages Schedule A1: Sch: 64/120 Rpt: 68/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	than M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state	PAC (ID#:)	7 Amount of Contribution (\$)
07/12/2024	Lowy, Martin		\$25.0
	6 Contributor address; City; State; Zip Code		
	Dallas, TX 75230-3709		
8 Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instruction Retired	ns)
Date	Full name of contributor out-of-state	PAC (ID#:)	Amount of Contribution (\$)
08/12/2024	Lowy, Martin		\$25.0
	Contributor address; City; State; Zip Code		
	Dallas, TX 75230-3709		
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	uns)
Retired		Retired	
Date	Full name of contributor out-of-state	PAC (ID#:)	Amount of Contribution (\$)
09/12/2024	Lowy, Martin	、	\$25.0
	Contributor address; City; State; Zip Code		
	Dallas, TX 75230-3709		
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Retired		Retired	
Date	Full name of contributor 🗌 out-of-state	PAC (ID#:)	Amount of Contribution (\$)
10/12/2024	Lowy, Martin		\$25.0
	Contributor address; City; State; Zip Code		
	Dallas, TX 75230-3709		
	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Retired		Retired	
Date	Full name of contributor out-of-state	PAC (ID#:)	Amount of Contribution (\$)
11/12/2024	Lowy, Martin		\$25.0
	Contributor address; City; State; Zip Code		
	Dallas, TX 75230-3709		
	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Retired		Retired	

6 Contributor address; City; State; Zip Code Dallas, TX 75230-3709 Pallas, TX 75230-3709 8 Principal occupation / Job title (See Instructions) Retired Paterired Date Full name of contributor out-of-state PAC (IDE:	The Instruction Guide explains how to complete this form. Sch: 65/120 Rpt: 69/199 2 FILEE NAME Johnson, Nathan M. (The Honorable) 3 Filer DU081605 4 Date 12/12/2024 5 Full name of contributor out-of-state PAC (DU/	1				
Johnson, Nattan M. (The Honorable) 00081605 4 Date 5 Ful name of contributor out-of-state PAC (IDF:	Johnson, Nathan M. (The Honorable) 00081605 4 Date 5 Full name of contribution out-d-state PAC (D#) 7 Amount of Contribution (\$) 12/12/2024 6 Contributor address: Chy; State: Zp Code 7 Amount of Contribution (\$) 8 Principal occupation / Job title (See Instructions) 9 Employer (See instructions) Retired Date Full name of contributor out-d-state PAC (D#) Amount of Contribution (\$) 09/06/2024 Lundblad, Christine out-d-state PAC (D#) Amount of Contribution (\$) 09/06/2024 Lundblad, Christine contributor address; Chy; State: Zp Code \$3.0 United address; Chy; State: Zp Code Not Employed Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See instructions) Amount of Contribution (\$) 07/23/2024 Full name of contributor out-d-state PAC (D#	The Instru	ction Guide explains how to complete this f	orm.		
Johnson, Nattan M. (The Honorable) 00081605 4 Date 12/12/2024 Full name of contributor Lowy, Martin Contributor address: City: State: Zip Code 7 Amount of Contribution (\$) Contributor address: City: State: Zip Code 7 Amount of Contribution (\$) 2014	Johnson. Nathan M. (The Honorable) 00081605 4 Date 5 Full name of contributin control-state PAC (D#	2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
12/12/2024 Lowy, Martin	12/12/2024 Lowy, Martin \$25.0 6 Contributor address; City; State: Zip Code \$25.0 7 Principal occupation / Job tite (See Instructions) Retired 9 Employer (See Instructions) Retired 7 Palas, TX 75230-3709 9 Employer (See Instructions) Retired Amount of Contributor 7 Date Full name of contributor out-of-state PAC (Dir: Amount of Contribution (\$) 93/06/2024 Luncoh, MA 01773-1114 Employer (See Instructions) Not Employed Amount of Contribution (\$) 93/06/2024 Full name of contributor out-of-state PAC (Dir: Amount of Contribution (\$) 93/06/2024 Full name of contributor out-of-state PAC (Dir: Amount of Contribution (\$) 93/06/2024 Full name of contributor out-of-state PAC (Dir: Amount of Contribution (\$) 93/07/23/2024 Full name of contributor out-of-state PAC (Dir: Amount of Contribution (\$) 93/08/2024 Full name of contributor out-of-state PAC (Dir: Collin college 9 Contributor address; City, State, Zip Code Collin college Amount of Contribution (\$) 9 Full name of contributor out-of-state PAC (Dir: Amount of Contribu					,
6 Contributor address; City: State; Zip Code Dallas, TX 75230-3709 9 Employer (See Instructions) Retired B Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date Full name of contributor	6 Contributor address; City; State; Zip Code Dallas, TX 75230-3709 9 Employer (See Instructions) Retired 8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date 09/06/2024 Full name of contributor	4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
6 Contributor address; City; State; Zip Code Dallas, TX 75230-3709 9 Employer (See Instructions) Retired 8 Principal occupation / Job title (See Instructions) Lundblad, Christine 9 Employer (See Instructions) Retired Date Full name of contributor Lundblad, Christine out-of-state PAC (ID#) Lundblad, Christine Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#) Not Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#) Not Employed Amount of Contribution (\$) Date Garland, TX 75044-4236 Employer (See Instructions) Collin college Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Adjunct professor Employer (See Instructions) Collin college Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#	6 Contributor address: City: State: Zip Code Dallas, TX 75230-3709 9 8 Principal occupation / Job title (See Instructions) Retired 9 Date Full name of contributor	12/12/2024	Lowy, Martin			\$25.00
8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date 09/06/2024 Full name of contributor out-of-state PAC (ID#:) Lundblad, Christine Amount of Contribution (\$) Contributor address; City; State; Zip Code Employer (See Instructions) Not Employed Amount of Contribution (\$) Date 09/06/2024 Full name of contributor out-of-state PAC (ID#:) Not Employed Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) Date 07/23/2024 Full name of contributor out-of-state PAC (ID#:) Contributor address; City; State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Adjunct professor Employer (See Instructions) Collin college Amount of Contribution (\$) Date 10/20/2024 Full name of contributor out-of-state PAC (ID#:) Maina, William Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$)	8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date 09/06/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$3.0 Contributor address; City, State; Zip Code		6 Contributor address; City; State; Zip Code			
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Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Maina, William \$500.0	Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Maina, William Contributor address; City; State; Zip Code S500.00 Dallas, TX 75240-3711 Dallas, TX 75240-3711		Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Maina, William \$500.0	Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Maina, William Contributor address; City; State; Zip Code Amount of Contributor \$\$500.00 Dallas, TX 75240-3711 Dallas, TX 75240-3711					
Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Maina, William	Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Maina, William Contributor address; City; State; Zip Code Amount of Contribution (\$) Dallas, TX 75240-3711 January 100 (\$)		Dallas, TX 75240-3711			
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Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/14/2024 Maina, William \$500.0	Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/14/2024 Maina, William \$500.0 Contributor address; City; State; Zip Code Dallas, TX 75240-3711	Principal occu				
12/14/2024 Maina, William \$500.0	12/14/2024 Maina, William \$500.00 Contributor address; City; State; Zip Code Dallas, TX 75240-3711		əd	I Not Employed		
	Contributor address; City; State; Zip Code Dallas, TX 75240-3711	Not Employe			Amount of Contribution (\$)	
Contributor address, City, State, Zip Code	Dallas, TX 75240-3711	Not Employe	Full name of contributor out-of-state PAC (ID#:			\$500 00
		Not Employe	Full name of contributor out-of-state PAC (ID#: Maina, William			\$500.00
		Not Employe	Full name of contributor out-of-state PAC (ID#: Maina, William			\$500.00
Dallas, TX 75240-3711		Not Employe	Full name of contributor out-of-state PAC (ID#: Maina, William			\$500.00
		Not Employe	Full name of contributor out-of-state PAC (ID#: Maina, William Contributor address; City; State; Zip Code			\$500.00
		Not Employe Date 12/14/2024	Full name of contributor out-of-state PAC (ID#: Maina, William Contributor address; City; State; Zip Code Dallas, TX 75240-3711)		\$500.00
NOT EMPIOYED		Not Employe Date 12/14/2024 Principal occu	Full name of contributor out-of-state PAC (ID#:_ Maina, William Contributor address; City; State; Zip Code Dallas, TX 75240-3711 upation / Job title (See Instructions)	Employer (See Instructions)		\$500.00
Not Employed		Not Employe Date 12/14/2024 Principal occu	Full name of contributor out-of-state PAC (ID#:_ Maina, William Contributor address; City; State; Zip Code Dallas, TX 75240-3711 upation / Job title (See Instructions))		\$500.00

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	The Instru	ction Guide explains how to comple	te this for	rm.	1	Total pages Schedule A1: Sch: 66/120 Rpt: 70/199	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		athan M. (The Honorable)				00081605	
4	Date	5 Full name of contributor out-of-state	• PAC (ID#:)	7	Amount of Contribution (\$)	
	12/13/2024	Malmberg, Kristin					\$100.00
		6 Contributor address; City; State; Zip Code					
	<u> </u>	Dallas, TX 75230-3145					
8		upation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Not employe	•	L	Not employed			
	Date		PAC (ID#:)		Amount of Contribution (\$)	
	12/14/2024						\$50.00
		Contributor address; City; State; Zip Code					
	Di dani ener	Dallas, TX 75230-3817			Ĺ		
		upation / Job title (See Instructions)		Employer (See Instructions	5)		
	Market Deve	· · · · · · · · · · · · · · · · · · ·		Shell	-		
	Date)		Amount of Contribution (\$)	
	11/27/2024	Marathon Oil Company Employees PA					\$2,500.00
		Contributor address; City; State; Zip Code					
		Findlay, OH 45840-3229					
	Principal occu	Ipation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	 •\		
	Еппора осса				<i>י</i> י		
	Date	Full name of contributor)		Amount of Contribution (\$)	
	Date 10/24/2024	Marshall, Denise	PAC (ID#:)			\$1,035.25
	10/24/2024						Φ 1,030.20
		Contributor address; City; State; Zip Code					
		Dallas, TX 75230-5137					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	;)		
	SAHM			NA	,		
	Date	Full name of contributor out-of-state)	I	Amount of Contribution (\$)	
	12/14/2024	Marshall, Karan				Allount of Contribution (*)	\$25.00
	±=/ ± ., = = = .	Contributor address; City; State; Zip Code					*= *····
		Dallas, TX 75209-2809					
-	Principal occu	I Ipation / Job title (See Instructions)		Employer (See Instructions	L;)		
	Not Employe			Not Employed	,		
-	. <u></u>			· -			

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The Instr	uction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 67/120 Rpt: 71/199
2 FILER NAM	 E		3 Filer ID (Ethics Commission Filers)
	Jathan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
12/13/2024			\$100.0
	6 Contributor address; City; State; Zip Code		
	Dallas, TX 75287-2776		
Principal occ	cupation / Job title (See Instructions)	9 Employer (See Instructions	<u></u>
Not Employ		Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)
07/27/2024			\$500.0
	Contributor address; City; State; Zip Code		
	Dallas, TX 75230-2819	1	
	cupation / Job title (See Instructions)	Employer (See Instructions	
Physician		University of Texas Sou	thwestwern Medical Center
Date	— —)	Amount of Contribution (\$)
08/17/2024	Mathis, Marilyn		\$5.0
	Contributor address; City; State; Zip Code		
	Dallas, TX 75214-2724		
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions	s)
Not employ		Not employed	,
Date)	Amount of Contribution (\$)
11/23/2024		/	\$8.0
	Contributor address; City; State; Zip Code		•
	Dallas, TX 75214-2724		
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions	5)
Not employ	/ed	Not employed	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/23/2024	Matteson, Mark		\$10.0
	Contributor address; City; State; Zip Code		1
	Ashland, MA 01721-2266		-
-	cupation / Job title (See Instructions)	Employer (See Instructions	5)
l elecom co	Jordinator	Harvard University	
Telecom co		Employer (See Instructions Harvard University	5)

	The Instru	ction Guide explains how to complete thi	is form.	1	Total pages Schedule A1: Sch: 68/120 Rpt: 72/199	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		athan M. (The Honorable)			00081605	,
4	Date	5 Full name of contributor Out-of-state PAC (I	(ID#:)	7	Amount of Contribution (\$)	
	11/01/2024	Matteson, Mark				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Ashland, MA 01721-2266				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	L IS)		
-	Telecom coc		Harvard University	-,		
╞	Date	Full name of contributor Out-of-state PAC (I	(ID#:)	Τ	Amount of Contribution (\$)	
	10/14/2024	Mazero, John	D#/		Amount of Continuation (+)	\$250.00
	10/1 //202 :			··-		<i>4</i>200101111111111111
		Continuator address, City, State, Zip Code				
		Dallas, TX 75214-4034				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	us)		
	Retired		Retired			
⊢	Date	Full name of contributor out-of-state PAC (I	(ID#:)	Т	Amount of Contribution (\$)	
	10/06/2024	McBee, Lynn				\$259.00
		Contributor address; City; State; Zip Code		.		
		Dallas, TX 75204-1629				
		upation / Job title (See Instructions)	Employer (See Instructions			
	CEO		Young Women's Prep N	Netw	vork	
	Date	Full name of contributor Out-of-state PAC (I	(ID#:)	Τ	Amount of Contribution (\$)	
	10/22/2024	McCabe, Michael				\$100.00
		Contributor address; City; State; Zip Code		1		
\vdash	-	Dallas, TX 75214-3164		Ĺ		
		upation / Job title (See Instructions)	Employer (See Instructions			
	Attorney	<u> </u>	Munck Wilson Mandala	ι —		
	Date	Full name of contributor Out-of-state PAC (I	ıD#:)		Amount of Contribution (\$)	
	08/21/2024	McCandless, Bruce				\$250.00
		Contributor address; City; State; Zip Code				
		West Lake Hills, TX 78746-3429				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Attorney		Long Burner Parks & De		.uv	
┝				Cita	gy	

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 69/120 Rpt: 73/199	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
		athan M. (The Honorable)			00081605	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/10/2024	McCants, Michael				\$10.00
		6 Contributor address; City; State; Zip Code		"		
		Austin, TX 78731-5405	r			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Not employe	20	Not employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/10/2024	McCarroll, Shannon				\$25.00
		Contributor address; City; State; Zip Code		"		
		Dallas, TX 75214-2137	i			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/15/2024	McCarroll, Shannon				\$50.00
		Contributor address; City; State; Zip Code		1		
	<u> </u>	Dallas, TX 75214-2137		Ĺ		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
				_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 05 00
	11/05/2024	McDonald, Susan				\$25.00
		Contributor address; City; State; Zip Code				
		Washington, DC 20008-3404				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>()</u>		
	Not Employe		Not Employed	5)		
				<u> </u>	Anne and a f O and aile stime (A)	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	ቀር 17ር ጋር
	10/10/2024	McGarr, Cappy				\$5,175.25
		Contributor address; City; State; Zip Code				
		Dallas, TX 75201-2305				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Finance		MCM Interests	-)		
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The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 70/120 Rpt: 74/199	
2 FILER NAME			3 Filer ID (Ethics Commission Fil	ers)
	han M. (The Honorable)		00081605	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
07/04/2024	McGarrahan, Andy			\$4.00
	6 Contributor address; City; State; Zip Code			
	Dallas, TX 75248-1505			
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions)	1	
Psychologist		Self employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/17/2024	McGarrahan, Andy	/		\$3.00
	Contributor address; City; State; Zip Code			Ŧ -
	Dallas, TX 75248-1505			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)		
Psychologist		Self employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/29/2024				\$3.00
ŀ				
	Dallas, TX 75248-1505			
	Dallas, TX 75248-1505 Dation / Job title (See Instructions)	Employer (See Instructions)	1	
Principal occup Psychologist		Employer (See Instructions) Self employed		
		Self employed	Amount of Contribution (\$)	
Psychologist	pation / Job title (See Instructions)	Self employed		\$3.00
Psychologist Date	Full name of contributor out-of-state PAC (ID#:_	Self employed		\$3.00
Psychologist Date	Full name of contributor out-of-state PAC (ID#:	Self employed		\$3.00
Psychologist Date	Full name of contributor out-of-state PAC (ID#:	Self employed		\$3.00
Psychologist Date 08/16/2024	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code Dallas, TX 75248-1505	Self employed	Amount of Contribution (\$)	\$3.00
Psychologist Date 08/16/2024 Principal occup	Full name of contributor out-of-state PAC (ID#:	Self employed	Amount of Contribution (\$)	\$3.00
Psychologist Date 08/16/2024	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code Dallas, TX 75248-1505	Self employed	Amount of Contribution (\$)	\$3.00
Psychologist Date 08/16/2024 Principal occup Psychologist Date Date	pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	Self employed	Amount of Contribution (\$)	
Psychologist Date 08/16/2024 Principal occup Psychologist	Dation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: McGarrahan, Andy Contributor address; City; State; Zip Code Dallas, TX 75248-1505 Dation / Job title (See Instructions)	Self employed	Amount of Contribution (\$)	\$3.00
Psychologist Date 08/16/2024 Principal occup Psychologist Date Date	pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	Self employed	Amount of Contribution (\$)	
Psychologist Date 08/16/2024 Principal occup Psychologist Date Date	pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code Dallas, TX 75248-1505 pation / Job title (See Instructions) Full name of contributor Gut-of-state PAC (ID#:_ McGarrahan, Andy	Self employed	Amount of Contribution (\$)	
Psychologist Date 08/16/2024 Principal occup Psychologist Date Date	pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code Dallas, TX 75248-1505 Dation / Job title (See Instructions) Full name of contributor Gut-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code	Self employed	Amount of Contribution (\$)	
Psychologist Date 08/16/2024 Principal occup Psychologist Date 09/18/2024 .	pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code Dallas, TX 75248-1505 pation / Job title (See Instructions) Full name of contributor Out-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code Dallas, TX 75248-1505 Dallas, TX 75248-1505	Self employed	Amount of Contribution (\$)	
Psychologist Date 08/16/2024 Principal occup Psychologist Date 09/18/2024 .	pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code Dallas, TX 75248-1505 Dation / Job title (See Instructions) Full name of contributor Gut-of-state PAC (ID#:_ McGarrahan, Andy Contributor address; City; State; Zip Code	Self employed	Amount of Contribution (\$)	

The Instruction Guide explains how to complete this form. Si 2 FILER NAME 3 Fi Johnson, Nathan M. (The Honorable) 00	Fotal pages Schedule A1: Sch: 71/120 Rpt: 75/199 Filer ID (Ethics Commission Filers)
Johnson, Nathan M. (The Honorable) 00 4 Date 5 Full name of contributor 001-of-state PAC (ID#:) 10/07/2024 McGarrahan, Andy	Eiler ID (Ethics Commission Filers)
Johnson, Nathan M. (The Honorable) 00 4 Date 5 Full name of contributor 001-of-state PAC (ID#:) 10/07/2024 McGarrahan, Andy	
10/07/2024 McGarrahan, Andy	00081605
	Amount of Contribution (\$)
	\$4.00
Dallas, TX 75248-1505	
B Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
Psychologist Self employed	
Date Full name of contributor Out-of-state PAC (ID#:) Ar	Amount of Contribution (\$)
10/10/2024 McGarrahan, Andy	\$4.00
Contributor address; City; State; Zip Code	
Dallas, TX 75248-1505	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Psychologist Self employed	
Date Full name of contributor out-of-state PAC (ID#:) Ar	Amount of Contribution (\$)
10/13/2024 McGarrahan, Andy	\$5.00
Contributor address; City; State; Zip Code	
Dallas, TX 75248-1505	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Psychologist Self employed	
	Amount of Contribution (\$)
10/19/2024 McGarrahan, Andy	\$3.00
Contributor address; City; State; Zip Code	
Dallas TX 75248-1505	
Dallas, TX 75248-1505 Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Self employed	mount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Psychologist Self employed Date Full name of contributor out-of-state PAC (ID#:) Article	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Psychologist Self employed Date Full name of contributor out-of-state PAC (ID#:) 10/21/2024 McGarrahan, Andy Ar	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Psychologist Self employed Date Full name of contributor out-of-state PAC (ID#:) Article	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Psychologist Self employed Date Full name of contributor out-of-state PAC (ID#:) 10/21/2024 McGarrahan, Andy Ar	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Psychologist Self employed Date Full name of contributor out-of-state PAC (ID#:) 10/21/2024 McGarrahan, Andy Ar	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Psychologist Self employed Date Full name of contributor out-of-state PAC (ID#:) 10/21/2024 McGarrahan, Andy Ar Contributor address; City; State; Zip Code Contributor Ar	

The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 72/120 Rpt: 76/199	
2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
Johnson, Na	athan M. (The Honorable)			00081605	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
10/24/2024	McGarrahan, Andy				\$3.00
	6 Contributor address; City; State; Zip Code		1		
Dringinal occu	Dallas, TX 75248-1505 Ipation / Job title (See Instructions)	9 Employer (See Instructions			
Principal occu Psychologist		Self employed	5)		
				Amount of Contribution (¢)	
Date	—)	'	Amount of Contribution (\$)	\$4.00
10/28/2024	McGarrahan, Andy				\$4.00
	Contributor address; City; State; Zip Code				
	Dallas, TX 75248-1505				
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Psychologist		Self employed	•		
Date	Full name of contributor out-of-state PAC (ID#:_)	<u> </u>	Amount of Contribution (\$)	
11/05/2024	McGarrahan, Andy			• •	\$3.00
	Contributor address; City; State; Zip Code		·		
	Dallas, TX 75248-1505	1			
	<pre>upation / Job title (See Instructions) </pre>	Employer (See Instructions	s)		
Psychologist		Self employed	. 		
Date	Full name of contributor out-of-state PAC (ID#:)	'	Amount of Contribution (\$)	
12/14/2024	McGarrahan, Andy				\$3.00
	Contributor address; City; State; Zip Code				
	Dallas, TX 75248-1505				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	 s)		
Psychologist		Self employed	.,		
Date	Full name of contributor out-of-state PAC (ID#:		Т	Amount of Contribution (\$)	
11/27/2024	McGuire, Michael	,			\$2,000.00
	Contributor address: City: State: Zip Code		·		* /-
	Dallas, TX 75205-3126				
	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
President/CE	EO	Andrews Distributing			

Johnson, Nuthan M. (The Honorable) 00081605 4 Date 5 Full name of contributor Image: Contributor Full name of contributor Image: Contributor Full name of contributor State: Zip Code Amount of Contribution (\$) State: Zip Code Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) State: Zip Code Full name of contributor Out-of-state PAC (ID#: State: Zip Code Full name of contributor State: Zip Code State: Zip Code State: Zip Code State: Zip Code Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) State: Zip Code Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) State: Zip Code Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) State: Zip Code Full name of contributor State: Zip Code	explains how to complete this form. Sch: 73/120 Rpt: 77/199 3 Filer ID (Ethics Commission Filers)			
Johnson, Nathan M. (The Honorable) 00081605 4 Date 5 Full name of contributor Image: Contributor address; City; State; Zip Code 7 Amount of Contribution (\$) 6 Contributor address; City; State; Zip Code 9 Employer (See Instructions) 9 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 7/30/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/30/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/30/2024 McRoberts, Hunt Contributor address; City; State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:		iction Guide explains how to complet	The Instruc	
Johnson, Nuttan M. (The Honorable) 00081605 4 Date 10/15/2024 5 Full name of contributor I out-of-state PAC (ID#: C00225342) 7 Amount of Contribution (\$) 6 Contributor address; City; State; Zip Code 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Date 07/30/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Pallas, TX 75214-3501 Employer (See Instructions) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date 09/09/2024 Full name of contributor out-of-state PAC (ID#:		2 FILER NAME		
10/15/2024 McGuireWoods Federal PAC s 6 Contributor address; City; State; Zip Code rechmond, VA 23219-3956 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:	onorable) 00081605			
6 Contributor address; City; State; Zip Code Richmond, VA 23219-3956 Richmond, VA 23219-3956 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:	contributor x out-of-state PAC (ID#: <u>C00225342</u>) 7 Amount of Contribution (\$)	5 Full name of contributor X out-of-state	4 Date	
6 Contributor address; City; State; Zip Code Richmond, VA 23219-3956 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/30/2024 McRoberts, Hunt Contributor address; City; State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/09/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self employed Date Dallas, TX 75214-3501 Employer (See Instructions) Self employed Principal occupation / Job title (See Instructions) Employer (See Instructions) Self employed Date Dallas, TX 75214-3501 Employer (See Ins			10/15/2024	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/30/2024 McRoberts, Hunt				
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/30/2024 McRoberts, Hunt				
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/30/2024 McRoberts, Hunt				
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/30/2024 McRoberts, Hunt				
07/30/2024 McRoberts, Hunt	See Instructions) 9 Employer (See Instructions)	upation / Job title (See Instructions)	8 Principal occuj	
07/30/2024 McRoberts, Hunt	contributor Out-of-state PAC (ID#:) Amount of Contribution (\$)	Full name of contributor	Date	
Contributor address; City; State; Zip Code				
Dallas, TX 75214-3501 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Independent landman Self employed Date Full name of contributor out-of-state PAC (ID#:) McRoberts, Hunt McRoberts; City; State; Zip Code Amount of Contribution (\$) Datlas, TX 75214-3501 Employer (See Instructions) Self employed Principal occupation / Job title (See Instructions) Employer (See Instructions) Self employed Principal occupation / Job title (See Instructions) Employer (See Instructions) Self employed Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Independent landman Self employed Self employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/13/2024 McRoberts, Hunt Self employed Self employed			01/00/2021	
Principal occupation / Job title (See Instructions) Independent landman Employer (See Instructions) Self employed Date Full name of contributor out-of-state PAC (ID#:) McRoberts, Hunt Amount of Contribution (\$) O9/09/2024 McRoberts, Hunt Contributor address; City; State; Zip Code Dallas, TX 75214-3501 Employer (See Instructions) Independent landman Employer (See Instructions) Self employed Principal occupation / Job title (See Instructions) Independent landman Employer (See Instructions) Self employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) McRoberts, Hunt Amount of Contribution (\$) Amount of Contribution (\$)	udiess, City, State, Zip Code	Continuation dualess, City, State, Zip Code		
Principal occupation / Job title (See Instructions) Independent landman Employer (See Instructions) Self employed Date Full name of contributor out-of-state PAC (ID#:) McRoberts, Hunt Amount of Contribution (\$) O9/09/2024 McRoberts, Hunt Contributor address; City; State; Zip Code Dallas, TX 75214-3501 Employer (See Instructions) Independent landman Employer (See Instructions) Self employed Principal occupation / Job title (See Instructions) Independent landman Employer (See Instructions) Self employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) McRoberts, Hunt Amount of Contribution (\$) Amount of Contribution (\$)				
Independent landman Self employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/09/2024 McRoberts, Hunt	75214-3501	Dallas, TX 75214-3501		
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/09/2024 McRoberts, Hunt	See Instructions) Employer (See Instructions)	upation / Job title (See Instructions)	Principal occu	
09/09/2024 McRoberts, Hunt Image: Contributor address; City; State; Zip Code Image: Contributor address; City; State; Zip Code Dallas, TX 75214-3501 Image: Dallas, TX 75214-3501 Image: Contributor address; City; State; Zip Code Principal occuration / Job title (See Instructions) Employer (See Instructions) Image: Contributor address; City; State; Zip Code Independent landman Self employed Self employed Date Full name of contributor ing out-of-state PAC (ID#:) Amount of Contribution (\$) 12/13/2024 McRoberts, Hunt Self employed	Self employed	it landman	Independent	
Contributor address; City; State; Zip Code Dallas, TX 75214-3501 Principal occupation / Job title (See Instructions) Independent landman Employer (See Instructions) Self employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/13/2024 McRoberts, Hunt	contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	Full name of contributor out-of-state	Date	
Dallas, TX 75214-3501 Employer (See Instructions) Independent landman Employer (See Instructions) Self employed Date Full name of contributor out-of-state PAC (ID#:) McRoberts, Hunt Amount of Contribution (\$)	, Hunt \$25.00	McRoberts, Hunt	09/09/2024	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Independent landman Self employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/13/2024 McRoberts, Hunt Self employed	uddress; City; State; Zip Code	Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions) Employer (See Instructions) Independent landman Self employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/13/2024 McRoberts, Hunt Self employed				
Principal occupation / Job title (See Instructions) Employer (See Instructions) Independent landman Self employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/13/2024 McRoberts, Hunt Self employed				
Independent landman Self employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/13/2024 McRoberts, Hunt Self employed				
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 12/13/2024 McRoberts, Hunt 9				
12/13/2024 McRoberts, Hunt				
Contributor address; City; State, Zip Code		·	12/13/2024	
	adress; City; State; Zip Code			
Dallas, TX 75214-3501		Dallas, TX 75214-3501		
Principal occupation / Job title (See Instructions) Employer (See Instructions)	75214-3501			
Independent landman Self employed		upation / Job title (See Instructions)	Principal occu	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	(See Instructions) Employer (See Instructions)			
10/25/2024 Menges, Patricia	(See Instructions) Employer (See Instructions) Self employed	it landman	Independent	
Contributor address; City; State; Zip Code	(See Instructions) Employer (See Instructions) Self employed Contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	Full name of contributor out-of-state	Independent Date	
	(See Instructions) Employer (See Instructions) Self employed contributor out-of-state PAC (ID#:) Amount of Contribution (\$) atricia \$8.00	The full name of contributor out-of-state In Menges, Patricia	Independent Date	
	(See Instructions) Employer (See Instructions) Self employed contributor out-of-state PAC (ID#:) Amount of Contribution (\$) atricia \$8.00	The full name of contributor out-of-state In Menges, Patricia	Independent Date	
	(See Instructions) Employer (See Instructions) Self employed contributor out-of-state PAC (ID#:) Amount of Contribution (\$) atricia \$8.00 address; City; State; Zip Code	The full name of contributor out-of-state of Menges, Patricia Contributor address; City; State; Zip Code	Independent Date	
	(See Instructions) Employer (See Instructions) Self employed contributor out-of-state PAC (ID#:) Amount of Contribution (\$) atricia \$8.00 address; City; State; Zip Code st, IL 60305-1740	The full name of contributor out-of-state of Menges, Patricia Contributor address; City; State; Zip Code River Forest, IL 60305-1740	Independent Date 10/25/2024	
Not Employed Not Employed	(See Instructions) Employer (See Instructions) Self employed contributor out-of-state PAC (ID#:) Amount of Contribution (\$) atricia address; City; State; Zip Code st, IL 60305-1740 (See Instructions) Employer (See Instructions)	Full name of contributor out-of-state I Menges, Patricia Outributor address; City; State; Zip Code River Forest, IL 60305-1740 Outributor address)	Independent Date 10/25/2024 Principal occur	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 74/120 Rpt: 78/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Johnson, Na	athan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/13/2024	Michaely, Peter		\$50.00
	6 Contributor address; City; State; Zip Code		
	-		
	Dallas, TX 75229-6149		
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	.))
Professor		UT Southwestern Medic	al Center
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/13/2024	Miertschin, Joe		\$500.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75219-8351		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)
Realtor/Prop	erty Mgmt	Self	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/03/2024	Miller, Michael		\$4.00
	Contributor address; City; State; Zip Code		
Contributor address, City, State, Zip Code			
Dallas, TX 75248-2205			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)
Not Employe	ed set of the set of t	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/17/2024	Miller, Michael		\$3.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75248-2205		
	pation / Job title (See Instructions)	Employer (See Instructions	5)
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/20/2024	Miller-Krause, Rose		\$1.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75238-3356		
	ipation / Job title (See Instructions)	Employer (See Instructions	
Not Employe	ed set of the set of t	Not Employed	

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	The Instru	ction Guide explains how to complete	this fo	rm.	1	Total pages Schedule A1: Sch: 75/120 Rpt: 79/199	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		than M. (The Honorable)				00081605	,
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:)	7	Amount of Contribution (\$)	
	10/11/2024	Mims, Diane					\$25.00
		6 Contributor address; City; State; Zip Code					
		Dallas, TX 75223-1245					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Not Employe	?d		Not Employed			
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	12/02/2024	Moak Casey PAC					\$1,000.00
		Contributor address; City; State; Zip Code					
		Austin, TX 78701-5002					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor 🔲 out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	08/16/2024	Moore, Amy					\$50.00
		Contributor address; City; State; Zip Code					
		Dallas, TX 75230-5303					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions			
	Pastor			NorthPark Presbyterian	Ch	urch	
	Date	Full name of contributor 🛛 out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	08/21/2024	Moore, Gregory					\$1,000.00
		Contributor address; City; State; Zip Code			1		
		Dallas, TX 75229-4132					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Realtor			Self employed			
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	07/23/2024	Morgan, Hicks					\$100.00
		Contributor address; City; State; Zip Code			1		
		Dallas, TX 75229-6359	<u>.</u>				
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Attorney			Self employed			

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2 F	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
J	Johnson, Na	athan M. (The Honorable)			00081605	
4 D	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
1	10/27/2024	Morgan, Karen				\$8.00
	1	6 Contributor address; City; State; Zip Code		1		
	ļ	1				
		Augusta, MI 49012-9403				
			9 Employer (See Instructions)	3)		
N	Not Employe	;d	Not Employed			
C	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
1	10/12/2024	Morriss, Frances				\$25.00
	1	Contributor address; City; State; Zip Code		1		
	ļ	1				
	ļ	1				
		Dallas, TX 75214-4528				
		upation / Job title (See Instructions)	Employer (See Instructions)	5)		
N	Not Employe	;d	Not Employed			
C	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
0	08/18/2024	Mote, Robin				\$50.00
	ł	Contributor address; City; State; Zip Code		1		
	ļ	1				
	ļ	1				
		Dallas, TX 75209-5902				
		upation / Job title (See Instructions)	Employer (See Instructions)	5)		
N	Not Employe	;d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
0	07/04/2024	Moxom, Ruth				\$25.00
	1	Contributor address; City; State; Zip Code		1		
	ļ	1				
	ļ	1				
		Dallas, TX 75206-5443				
		upation / Job title (See Instructions)	Employer (See Instructions)	5)		
F	Retired		Retired			
C	Date	Full name of contributor X out-of-state PAC (ID#: C	00283135	Γ	Amount of Contribution (\$)	
1	10/15/2024	National Association of Benefits and Insurance F	Professionals PAC			\$500.00
	1	Contributor address; City; State; Zip Code		1		
	ļ	1				
	ļ	1				
		Cranford, NJ 07016-2464				
P	[•] rincipal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	3)		
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 77/120 Rpt: 81/199	
2	2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		athan M. (The Honorable)			00081605	···· - ··· - ,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/13/2024	National Association of Insurance and Financial	Advisors Texas PAC			\$1,000.00
		6 Contributor address; City; State; Zip Code				
		1				
		1				
		West Lake Hills, TX 78746-6446				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
			<u> </u>	—		
	Date	Full name of contributor x out-of-state PAC (ID#: C			Amount of Contribution (\$)	
	11/27/2024	National Association of Mutual Insurance Compa				\$1,000.00
		Contributor address; City; State; Zip Code				
		1				
		W				
	Dringingloog	Washington, DC 20001-6703				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	5)		
=			<u> </u>	Π	Amount of Contribution (¢)	
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#: National Association of Social Workers PAC)		Amount of Contribution (\$)	\$200.00
	10/15/2024					ΦΖΟΟ.ΟΟ
	Contributor address; City; State; Zip Code					
		1				
		Austin, TX 78701-2010				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u>ا</u> چ)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	07/23/2024	Neary, George				\$100.00
		Contributor address; City; State; Zip Code		1		
		1				
		1				
		Dallas, TX 75230-5210				
		ipation / Job title (See Instructions)	Employer (See Instructions)	3)		
L	Not Employe	:d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/21/2024	Nicholson, Gary				\$50.00
		Contributor address; City; State; Zip Code				
		1				
		Dallag TV 75249 5220				
	Dringing oog	Dallas, TX 75248-5330	Employer (See Instructions			
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	5)		
⊢						

l							
The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 78/120 Rpt: 82/199					
2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
	athan M. (The Honorable)		00081605				
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)				
10/15/2024	Noll, Katherine		\$10.00				
	6 Contributor address; City; State; Zip Code		1				
	Dallas, TX 75238-3403						
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ;)				
H. R. Directo		Alcuin School	,				
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)				
10/15/2024		,	\$5,000.00				
	Irving, TX 75062-2781						
Principal occl	upation / Job title (See Instructions)	Employer (See Instructions	5)				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)				
12/14/2024			\$100.00				
	Contributor address; City; State; Zip Code						
	Dallas, TX 75206-6815						
	upation / Job title (See Instructions)	Employer (See Instructions					
Attorney		Cowles & Thompson P.0	C				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)				
10/15/2024	Nye, Allen		\$15,000.00				
	Contributor address; City; State; Zip Code		1				
Dringing ago	Dallas, TX 75225-7117		-				
-	upation / Job title (See Instructions)	Employer (See Instructions Oncor Electric Delivery (
Attorney							
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)				
07/29/2024			\$5.00				
	Contributor address; City; State; Zip Code						
	Sausalito, CA 94965-1936						
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)				
Virtual pape		Pacific Gas & Electric	<i>''</i>				

	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 79/120 Rpt: 83/199	
2	2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)	
		athan M. (The Honorable)				00081605	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/20/2024	Olson, Ron					\$25.00
	I	6 Contributor address; City; Sta			1		
		Dallas, TX 75204-1701					
8		ipation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Not Employe	ed		Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/14/2024	Olson, Ron	_				\$25.00
		Contributor address; City; Sta			1		
		Dallas, TX 75204-1701					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	ed		Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	11/27/2024	Oncor Texas State Politica	I Action Committee				\$5,000.00
	I	Contributor address; City; Sta	ıte; Zip Code		1		
		Dallas, TX 75202-1234		1 /2	Ĺ		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
╘					-		
	Date	-	x out-of-state PAC (ID#:	<u>C00336735</u>)		Amount of Contribution (\$)	* 500.00
	11/27/2024	Organon & Co Employee P					\$500.00
		Contributor address; City; Sta	ıte; Zip Code				
		Washington, DC 20001-14	.29				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> נו		
	1 1110124. 0012.				,		
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/25/2024	Ortiz, Jose	_				\$50.00
	ł	Contributor address; City; Sta	ate; Zip Code		1		
		Irving, TX 75038-8819					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Attorney			Ortiz Law Firm			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 80/120 Rpt: 84/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Johnson, Na	than M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
08/25/2024	Ortiz, Jose		\$100.00
	6 Contributor address; City; State; Zip Code		
	Irving, TX 75038-8819		
	pation / Job title (See Instructions)	9 Employer (See Instructions	3)
Attorney		Ortiz Law Firm	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/25/2024	Ortiz, Jose		\$50.00
	Contributor address; City; State; Zip Code		
	In the TV 75000 0010		
Dringing Lagrage	Irving, TX 75038-8819		
Attorney	pation / Job title (See Instructions)	Employer (See Instructions Ortiz Law Firm	5)
			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/27/2024	Ortiz, Jose		\$50.00
	Contributor address; City; State; Zip Code		
	Irving, TX 75038-8819		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Attorney		Ortiz Law Firm	,
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/25/2024	Ortiz, Jose)	\$50.00
	Contributor address; City; State; Zip Code		
	;;		
	Irving, TX 75038-8819		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
Attorney		Ortiz Law Firm	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/01/2024	Overby, Debra		\$25.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75238-4924	I	
-	pation / Job title (See Instructions)	Employer (See Instructions	5)
Not Employe	20	Not Employed	

				_		
	The Instru	ction Guide explains how to complete	this form.	1	Total pages Schedule A1: Sch: 81/120 Rpt: 85/199	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		than M. (The Honorable)			00081605	
4	Date	5 Full name of contributor out-of-state PA	\C (ID#:)	7	Amount of Contribution (\$)	
	11/27/2024	PAC of Winstead PC				\$1,000.00
		6 Contributor address; City; State; Zip Code		"		
0	Dringing occu	Dallas, TX 75201-1743	Employer (See Instruction	<u> </u>		
ð		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor 🔲 out-of-state PA	SC (ID#:)	T	Amount of Contribution (\$)	
	10/15/2024	PAC of the Independent Insurance Agents	s of Texas			\$500.00
		Contributor address; City; State; Zip Code		"		
		Austin TV 70760 4407				
	Dringing occu	Austin, TX 78768-4487	Employor (Soo Instruction			
	Phincipal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date	Full name of contributor out-of-state PA	<u>с (ID</u> ⁴)	Т	Amount of Contribution (\$)	
	Dale 11/20/2024	Full name of contributor out-of-state PA PAC of the Independent Insurance Agents				\$500.00
		Contributor address; City; State; Zip Code	3 01 10,403			ΨΟΟΟ.ΟΟ
		Austin, TX 78768-4487				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor 🔲 out-of-state PA	.C (ID#:)	Τ	Amount of Contribution (\$)	
	07/04/2024	Page, Elise				\$25.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75238-3619				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Senior Contr		CBRE Inc.	-,		
	Date	Full name of contributor Out-of-state PA	.C (ID#:)	Τ	Amount of Contribution (\$)	
	12/14/2024	Paine, Linda				\$25.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77030-1203	i			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney		Not employed			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 82/120 Rpt: 86/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	athan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
08/16/2024			\$10.00
	6 Contributor address; City; State; Zip Code		
	Dallas, TX 75230-4930		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	3)
Not Employ	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_	·)	Amount of Contribution (\$)
10/20/2024	Parchem, Ann		\$5.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75230-4930		
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	;)
Not Employ	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/20/2024	Parchem, Ann		\$25.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75230-4930		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)
Not Employ	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/14/2024	Parchem, Ann		\$25.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75230-4930		
-	upation / Job title (See Instructions)	Employer (See Instructions	5)
Not Employ	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/14/2024	Parchem, Ann		\$25.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75230-4930		
-	upation / Job title (See Instructions)	Employer (See Instructions	3)
Not Employ	ed	Not Employed	

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 83/120 Rpt: 87/199	
2 FILER NAME			3 Filer ID (Ethics Commissio	n Filers)
	athan M. (The Honorable)		00081605	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
12/12/2024	Pardue, Leslie			\$2,500.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78737-4487			
	upation / Job title (See Instructions)	9 Employer (See Instructions		
Consultant		Johnson and Johnson A	ttorneys at Law	
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	
10/21/2024	Parens, Lenore			\$25.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75238-2620			
	upation / Job title (See Instructions)	Employer (See Instructions	;)	_
Not Employe	ed	Not Employed		
Date	Full name of contributor X out-of-state PAC (ID#	С00103549)	Amount of Contribution (\$)	
11/27/2024	Parsons Corporation PAC			\$500.00
	Contributor address; City; State; Zip Code			
	Pasadena, CA 91124-0001			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/17/2024	Pelc, Robert			\$15.00
	Contributor address; City; State; Zip Code			
	Georgetown, TX 78633-1811			
	upation / Job title (See Instructions)	Employer (See Instructions	6)	
Not employe)d	Not employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/04/2024	Pellizzi, Karen			\$100.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75248-7900			
	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Investments		Karen Pellizzi		

The Instru	ction Guide explains how to complete th	nis form.	1 Total pages Schedule A1: Sch: 84/120 Rpt: 88/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	athan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of Contribution (\$)
07/17/2024	Pendery, Julia		\$50.00
	6 Contributor address; City; State; Zip Code		
	Lake Kiowa, TX 76240-9420		
	Ipation / Job title (See Instructions)	9 Employer (See Instruction:	s)
Not Employe	· · · · · · · · · · · · · · · · · · ·	Not Employed	·
Date	—	(ID#:)	Amount of Contribution (\$)
09/12/2024			\$50.00
	Contributor address; City; State; Zip Code		
Dringing ogg	Lake Kiowa, TX 76240-9420	Employer (Cap Instruction	
Principal occu Not Employe	Ipation / Job title (See Instructions)	Employer (See Instruction: Not Employed	S)
			T
Date	—	(ID#:)	Amount of Contribution (\$)
12/13/2024	Penn Entertainment Inc. Texas PAC		\$2,000.00
	Contributor address; City; State; Zip Code		
	Wyomissing, PA 19610-1247		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instruction	
ΕΠΠΟΙΡάΙ Ουσα			5)
Data	Full name of contributor Out-of-state PAC (<u> </u>	Amount of Contribution (\$)
Date 10/16/2024	Full name of contributor out-of-state PAC (Perales, Julie	(ID#:)	Amount of Contribution (\$) \$5.00
10/10/2024	· · · · · · · · · · · · · · · · · · ·		φ3.00
	Contributor address; City; State; Zip Code		
	Driftwood, TX 78619-8054		
Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	l s)
Not Employe		Not Employed	~,
Date	Full name of contributor Out-of-state PAC (Amount of Contribution (\$)
12/14/2024	Peters, Sheila	,ID#/	\$50.00
	Contributor address; City; State; Zip Code		
	Continuation address, City, State, Zip Code		
	Austin, TX 78746-5573		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instruction	s)
Nurse Anest		US Anesthesia Partners	

The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 85/120 Rpt: 89/199	
2 FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
Johnson, Na	athan M. (The Honorable)			00081605	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
10/11/2024	Pitts, John				\$500.00
	6 Contributor address; City; State; Zip Code		1		
	Austin, TX 78703-2419				
8 Principal occur	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
Consultant		Self employed			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
10/07/2024	Pleasants, Chrystin				\$25.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75214-5315				
	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Clinical resea	arch monitor	Self employed			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
10/17/2024	Pleasants, Chrystin				\$25.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75214-5315				
	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Clinical resea	arch monitor	Self employed			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
12/13/2024	Pleasants, Chrystin				\$25.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75214-5315				
	pation / Job title (See Instructions)	Employer (See Instructions	3)		
Clinical resea	arch monitor	Self employed			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
10/15/2024	Political Action Committee for Engineers				\$500.00
	Contributor address; City; State; Zip Code		1		
	Austin, TX 78768-2145				
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	3)		

	The Instru	ction Guide explains how to compl	lete this fo	orm.	1	Total pages Schedule A1: Sch: 86/120 Rpt: 90/199	
2	FILER NAME				3	Filer ID (Ethics Commissi	on Filers)
		athan M. (The Honorable)				00081605	
4	Date	5 Full name of contributor out-of-stat	ate PAC (ID#:)	7	Amount of Contribution (\$)	
	11/15/2024	Powell, Gideon					\$10,000.00
		6 Contributor address; City; State; Zip Code					
		Dallas, TX 75251-1800					
8		upation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	CEO			Cholla Inc.			
	Date		ate PAC (ID#:)		Amount of Contribution (\$)	
	10/04/2024						\$100.00
		Contributor address; City; State; Zip Code					
		Dallas, TX 75229-2721	r		Ĺ		
		upation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe			Not Employed	-		
	Date		ate PAC (ID#:)		Amount of Contribution (\$)	
	10/31/2024	Quittner, Claudia					\$36.00
		Contributor address; City; State; Zip Code	е				
		Dallas, TX 75252-5832					
┝	Dringing occ	upation / Job title (See Instructions)	I	Employor (Soo Instructions	<u> </u>		
	Research Nu	,		Employer (See Instructions UT Southwestern Medic		Center	
╞							
	Date		ate PAC (ID#:)		Amount of Contribution (\$)	¢500.00
	11/27/2024						\$500.00
		Contributor address; City; State; Zip Code	е				
		Dallas, TX 75219-3965					
⊢	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	;)		
	Partner			CIC Partners	''		
╞	Date	Full name of contributor Out-of-sta		· ·	1	Amount of Contribution (\$)	
	Date 10/11/2024	Ray, Linda C	ate PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	10/11/2024						Ψ.Ο.ΟΟ
		Contributor address; City; State; Zip Code	e				
		Washington, DC 20009-1889					
⊢	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	;)		
	Attorney Adv			Federal Communication		Commission	
┝			I				

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	The Instru	ction Guide explains how to	o complete this f	orm.	1	Total pages Schedule A1: Sch: 87/120 Rpt: 91/199	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		than M. (The Honorable)				00081605	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	11/01/2024	Ray, Linda C					\$50.00
		6 Contributor address; City; State					
		Washington, DC 20009-1889	9				
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions))		
	Attorney Adv	visor		Federal Communications	s C	ommission	
⊨	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/13/2024	Red Rock Texas PAC	-				\$4,000.00
		Contributor address; City; State					
		Austin, TX 78701-2114					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions))		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/13/2024	Reid, Betheny					\$1,000.00
		Contributor address; City; State					
		Dallas, TX 75248-2914					
	Principal occu	L pation / Job title (See Instructions)		Employer (See Instructions))		
	Consultant			Betheny I Reid Associate	es		
⊨	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/19/2024	Reitbauer, Terese	• · · -				\$10.00
		Contributor address; City; State					
		Annville, PA 17003-1949					
		pation / Job title (See Instructions)		Employer (See Instructions))		
	Not employe	ed		Not employed			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/12/2024	Richards, Debbi					\$100.00
		Contributor address; City; State	; Zip Code				
		Corland TV 75044 7025					
⊢	Drinoinal accu	Garland, TX 75044-7825		Employor (See Instructions)	<u> </u>		
	Educator	pation / Job title (See Instructions)		Employer (See Instructions) Dallas College)		
\vdash							

	The Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 88/120 Rpt: 92/199	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Johnson, Na	athan M. (The Honorable)				00081605	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/14/2024	Richards, Debbi					\$100.00
		6 Contributor address; City; State			1		
		Garland, TX 75044-7825					
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Educator			Dallas College			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/14/2024	Richardson, Lisa	-				\$40.00
	I	Contributor address; City; State					
			, <u> </u>				
		Des Plaines, IL 60016-6621					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u> ة)		
	Not Employe			Not Employed			
╞	Date	Full name of contributor	out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	12/13/2024	Robison, Douglass		/			\$2,000.00
	12/10/2027		o, Zin Codo				Ψ2,000.00
		Contributor address; City; State	3; Zip Coue				
		Abilene, TX 79605-4815					
┝	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ו)		
	Founder and			Natura Resources	,		
╞					<u> </u>	t (Ω-strike ties (Φ)	
	Date		out-of-state PAC (ID#:)		Amount of Contribution (\$)	*1 000 00
	11/20/2024						\$1,000.00
		Contributor address; City; State	e; Zip Code				
		Longing ML (19022-1620					
	Driveinel ees	Lansing, MI 48933-1620		European (Oppositions	Ĺ		
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/22/2024	Roe, Erin					\$250.00
	I	Contributor address; City; State	e; Zip Code		1		
		Dallas, TX 75205-1892					
Γ		upation / Job title (See Instructions)		Employer (See Instructions			
	Physician			Sol Endocrinology PLLC	2		

				1 Total pages Schedule A1:
	The Instru	ction Guide explains how to complete this f	orm.	Sch: 89/120 Rpt: 93/199
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		athan M. (The Honorable)		00081605
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	10/07/2024	Rose, Deedie		\$2,500.00
		6 Contributor address; City; State; Zip Code		
		Dallas, TX 75209-2851		
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	
	Investor		Cardinal Investment Cor	mpany Inc.
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/14/2024	Rosenfield, Laura		\$50.00
		Contributor address; City; State; Zip Code		
		Dallac TV 75254-7672		
⊢	Drincinal Occu	Dallas, TX 75254-7673 upation / Job title (See Instructions)	Employer (See Instructions)	
	Physician		Self-Employed	<i>v</i>
╞═	Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
	Dale 10/21/2024	Full name of contributor out-of-state PAC (ID#: Routh, Susan	/	Amount of Contribution (\$) \$25.00
		Contributor address; City; State; Zip Code		+==
		Dallas, TX 75230-1722		
		upation / Job title (See Instructions)	Employer (See Instructions)	
L	Not employe	:d	Not employed	
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	11/20/2024			\$2,000.00
		Contributor address; City; State; Zip Code		
		Austin, TX 78701-2164		
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> ;)
	·			,
╞╴	Date	Full name of contributor Out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	12/13/2024	Ryan LLC PAC		\$2,500.00
		Contributor address; City; State; Zip Code		
L		Dallas, TX 75240-5050		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<i>.</i>)
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The I	Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 90/120 Rpt: 94/199	
2 FILER	NAME			3	Filer ID (Ethics Commissio	on Filers)
Johns	son, Na	than M. (The Honorable)			00081605	
4 Date		5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
12/02/	2/2024	Rydman, John				\$2,500.00
		6 Contributor address; City; State; Zip Code		1		
		I				
		Houston, TX 77007-7006				
8 Princip	pal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> 5)		
Owne		•	Spec's			
Date		Full name of contributor X out-of-state PAC (ID#: <u>C</u>	C00526509)	Γ	Amount of Contribution (\$)	
)/2024	Safelite Group Inc. PAC	,		,	\$500.00
l		Contributor address; City; State; Zip Code				
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		I				
l		Columbus, OH 43235-5086				
Princip	pal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
l						
Date		Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
08/16/	6/2024	Salyers, Jani				\$50.00
		Contributor address; City; State; Zip Code		ĺ		
		l				
D in size		Dallas, TX 75230-2727		ļ		
	pal occup ems dev	pation / Job title (See Instructions)	Employer (See Instructions	5)		
-		·	ArgoData Resources			
Date	10004	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 250.00
10/11/	L/2024	Sampson, DeMetris				\$250.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75376-3834				
Princip	pal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Employe	· · ·	Not Employed	,		
Date		Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	1/2024	Sargent, Socorro Muller			.,	\$20.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79932-3209				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
Not E	Employe	d	Not Employed			

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2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Johnson, Na	athan M. (The Honorable)			00081605	
4	Date	5 Full name of contributor X out-of-state PAC (ID#:	;00639138)	7	Amount of Contribution (\$)	
	11/27/2024	Sazerac Company Inc PAC				\$1,000.00
		6 Contributor address; City; State; Zip Code				
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		1				
		Washington, DC 20002-5809		Ļ		
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	;)		
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	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/10/2024	Seldin, Ellen				\$6.00
		Contributor address; City; State; Zip Code	ļ			
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	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷15 00
	07/23/2024	Seldin, Ellen				\$15.00
		Contributor address; City; State; Zip Code				
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		Dallas, TX 75230-2437				
<u> </u>	Drincinal occu	ipation / Job title (See Instructions)	Employer (See Instructions	L		
	Physician		EMCARE	'n		
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		Dallas, TX 75230-2437				
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	Physician		EMCARE			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/23/2024	Seldin, Ellen			· · · · · · · · · · · · · · · · · · ·	\$15.00
		Contributor address; City; State; Zip Code				
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		Dallas, TX 75230-2437				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u>د</u> ټ)		
	Physician		EMCARE			
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The Instruction Guide explains how to complete this Form. 1 Total pages Schedule A1: Sch: '9/120 Rp: '9/129 2 FILER NAME Johnson, Nattar M. (The Honorable) 3 Filer ID (Ethics Commission F 00081605 4 Date 09/06/2024 5 Full name of contributor out-of-state PAC (ID#:) Sell, Alisa 7 Amount of Contribution (\$) 9 Date 09/06/2024 5 Full name of contributor address; City; State; Zip Code 7 Amount of Contribution (\$) 09/06/2024 Full name of contributor out-of-state PAC (ID#:) 9 Employer (See Instructions) Not Employed 7 Amount of Contribution (\$) 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Amount of Contribution (\$) Pate Full name of contributor out-of-state PAC (ID#:) Employer (See Instructions) UTSW Medical Center Amount of Contribution (\$) Principal occupation / Job title (See Instructions) RN Full name of contributor out-of-state PAC (ID#:	tet this form. Sch: 93/120 Rpt: 97/199 3 Filer ID (Ethics Commission Filers) 00081605 IPAC (ID#:) 7 9 Employer (See Instructions) Not Employed IPAC (ID#:) Amount of Contribution (\$) \$25.00 IPAC (ID#:) Amount of Contribution (\$) \$25.00 IPAC (ID#:) Amount of Contribution (\$) \$25.00 Employer (See Instructions) UTSW Medical Center \$25.00 IPAC (ID#:) Amount of Contribution (\$) \$50.00 Employer (See Instructions) UTSW Medical Center \$50.00 IPAC (ID#:) Amount of Contribution (\$) \$50.00 Employer (See Instructions) Not Employed Amount of Contribution (\$) \$50.00	The instruction Guide explains how to complete this form. Sch: 93/120 Rpt: 97/199 2 FILER NAME 3 Filer 10 (Ellise commission Filers) 30hrson, Nathan M. (The Honorable) 3 Filer 10 (Ellise commission Filers) 4 Date 5 Full name of contributor out-of-same PAC (De 7 6 Osl(06/2024 5 Full name of contributor out-of-same PAC (De 7 6 Osl(06/2024 5 Full name of contributor out-of-same PAC (De 7 0sl(06/2024 5 Full name of contributor out-of-same PAC (De 7 Amount of Contribution (\$) 11/14/2024 Full name of contributor out-of-same PAC (De Amount of Contribution (\$) \$25,0 11/14/2024 Sepulveda, Esmeralda Contributor address: City: State: Zip Code Amount of Contribution (\$) \$25,0 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$50,0 12/14/2024 Full name of contributor out-of-same PAC (De Amount of Contribution (\$) \$50,0 12/14/2024 Full name of contributor out-of-same PAC (De Not Employeed Amount of Contributio						
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		Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) 08/16/2024 Shea, Sally Contributor address; City; State; Zip Code Amount of Contribution (\$) Richardson, TX 75081-4424 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)						
		Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) 08/16/2024 Shea, Sally Contributor address; City; State; Zip Code Amount of Contribution (\$) Richardson, TX 75081-4424 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)						
		Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) 08/16/2024 Shea, Sally Contributor address; City; State; Zip Code Amount of Contribution (\$) Richardson, TX 75081-4424 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)						
		Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/16/2024 Shea, Sally Contributor address; City; State; Zip Code Amount of Contribution (\$) Contributor address; City; State; Zip Code Richardson, TX 75081-4424 Employer (See Instructions)						
		Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/16/2024 Shea, Sally \$50.0 Contributor address; City; State; Zip Code Richardson, TX 75081-4424 Principal occupation / Job title (See Instructions) Employer (See Instructions))		
Not Employed Not Employed		08/16/2024 Shea, Sally \$50.0 Contributor address; City; State; Zip Code \$50.0 Richardson, TX 75081-4424 Employer (See Instructions)	Not Employe	ed	Not Employed			
		Contributor address; City; State; Zip Code Richardson, TX 75081-4424 Principal occupation / Job title (See Instructions) Employer (See Instructions))	Amount of Cont		
08/16/2024 Shea, Sally	Not Employed PAC (ID#:) Amount of Contribution (\$)	Richardson, TX 75081-4424 Principal occupation / Job title (See Instructions) Employer (See Instructions)	08/16/2024	Shea, Sally			:	\$50.00
Contributor address; City; State; Zip Code	Not Employed	Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State; Zip Code				
	Not Employed PAC (ID#:) Amount of Contribution (\$)	Principal occupation / Job title (See Instructions) Employer (See Instructions)						
	Not Employed PAC (ID#:) Amount of Contribution (\$)	Principal occupation / Job title (See Instructions) Employer (See Instructions)		Dishardson TV 75001 4424				
Disbordson TV 7E001 4404	Not Employed PAC (ID#:) Amount of Contribution (\$)		Drinsingl oppu		Employer (Cool Instructions	<u></u>		
	Not Employed PAC (ID#:) Amount of Contribution (\$) \$50.00	Not Employed)		
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Not Employed PAC (ID#:) Amount of Contribution (\$) \$50.00 Employer (See Instructions)	Not Employed	Νοι Επιριογε		Not Employed			
Richardson TX 75081-4424		Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) 08/16/2024 Shea, Sally Contributor address; City; State; Zip Code Richardson, TX 75081-4424 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employed		Richardson TX 75081-4424				
		Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/16/2024 Shea, Sally	Principal occu		Employer (See Instructions)		
	Employer (See Instructions)	Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/16/2024 Shea, Sally \$50.0 Contributor address; City; State; Zip Code \$50.0 Richardson, TX 75081-4424 Employer (See Instructions)				,		
Date Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$)		08/16/2024 Shea, Sally \$50.0 Contributor address; City; State; Zip Code \$50.0 Richardson, TX 75081-4424 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	Date	Full name of contributor)	Amount of Cont	ribution (\$)	
08/16/2024 Shea, Sally	Not Employed	Richardson, TX 75081-4424 Principal occupation / Job title (See Instructions) Employer (See Instructions)	08/16/2024	Shea, Sally			:	\$50.00
Contributor address; City; State; Zip Code	PAC (ID#:) Amount of Contribution (\$)	Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State; Zip Code				
	PAC (ID#:) Amount of Contribution (\$)	Principal occupation / Job title (See Instructions) Employer (See Instructions)						
	PAC (ID#:) Amount of Contribution (\$)	Principal occupation / Job title (See Instructions) Employer (See Instructions)		Richardson TX 75081-4424				
Disbordson TX 75091 4424	PAC (ID#:) Amount of Contribution (\$)		Dringingloggy		Employer (Cap Instructions	<u>, </u>		
	Not Employed PAC (ID#:) Amount of Contribution (\$) \$50.00	Not Employed)		
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Not Employed PAC (ID#:) Amount of Contribution (\$) \$50.00 Employer (See Instructions)				Not Employed			
	Not Employed PAC (ID#:) Amount of Contribution (\$) \$50.00 Employer (See Instructions)							

The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 94/120 Rpt: 98/199	
2 FILER NAME			3 Filer ID (Ethics Commission Filer	rs)
Johnson, Na	than M. (The Honorable)		00081605	,
4 Date	5 Full name of contributor Out-of-state PAC (ID#	#:)	7 Amount of Contribution (\$)	
09/14/2024	Shea, Sally		\$2	25.00
	6 Contributor address; City; State; Zip Code			
	Richardson, TX 75081-4424			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
Not Employe	ed	Not Employed		
Date	Full name of contributor Out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
10/23/2024	Shea, Sally			25.00
	Contributor address; City; State; Zip Code			
	Richardson, TX 75081-4424			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
Not Employe	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
08/17/2024	Shivers, Melody		\$5	50.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75243-8087			
	pation / Job title (See Instructions)	Employer (See Instructions		
Not employe		Not employed		
Date		#:)	Amount of Contribution (\$)	
07/24/2024	Siler, Grace		Ś	\$7.00
	Contributor address; City; State; Zip Code			
	Henderson, TX 75654			
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions)	
Not employe		Not employed	, ,	
Date	Full name of contributor out-of-state PAC (ID#	4·)	Amount of Contribution (\$)	
10/17/2024	Siler, Grace	//		20.00
	Contributor address; City; State; Zip Code			
	Henderson, TX 75654			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
Not employe	ed	Not employed		

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 95/120 Rpt: 99/199	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Johnson, Na	than M. (The Honorable)			00081605	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/14/2024	Silverstein, Alison				\$100.00
		6 Contributor address; City; State; Zip Code		1		
		Austin, TX 78723-4905				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Consultant		Self employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/14/2024	Skruch, Brian				\$35.00
		Contributor address; City; State; Zip Code				
		Farmers Branch, TX 75234-4801				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Sales Engine	eer	Samsara			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/03/2024	Smith, Robert				\$1,000.00
		Contributor address; City; State; Zip Code		ł		
		Dallas, TX 75230-1955				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	President an	d CEO	Accident and Injury Clin	ic		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	07/04/2024	Smith, William				\$2.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77008-3914				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/14/2024	Smith-Connell, Kathryn				\$5.00
		Contributor address; City; State; Zip Code		1		
		· · · · · · · · · · · · · · · · · · ·				
		Chicago, IL 60626-6943				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not employe	d	Not employed			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 96/120 Rpt: 100/199	9
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Johnson, Na	athan M. (The Honorable)	!		00081605	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/23/2024	Snider, Tim	1			\$10.00
	I	6 Contributor address; City; State; Zip Code	1	1		
			1			
		Port Townsend, WA 98368-6019				
	Principal occu Not Employe		9 Employer (See Instructions) Not Employed	3)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/31/2024	Snyder, Michael				\$100.00
	1	Contributor address; City; State; Zip Code		1		
		1				
		1	1			
		Dallas, TX 75234-6442				
		pation / Job title (See Instructions)	Employer (See Instructions)	5)		
L	Manager		Freddie Mac			
	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	12/14/2024	Snyder, Michael				\$50.00
	ļ	Contributor address; City; State; Zip Code]		
	ļ	1	1			
		Dellas TV 75224 6442	1			
┝	Drizeinal acou	Dallas, TX 75234-6442				
	Principal occu Manager	ipation / Job title (See Instructions)	Employer (See Instructions) Freddie Mac	5)		
⊨			<u> </u>	—		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	*1 000 00
	11/20/2024	Southern Glazers PAC of Texas	!			\$1,000.00
		Contributor address; City; State; Zip Code				
		1	1			
		Austin, TX 78701-1696	1			
┢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	上 s)		
		, , , , , , , , , , , , , , , , , , ,		-,		
╞	Date	Full name of contributor Out-of-state PAC (ID#:		Τ	Amount of Contribution (\$)	
	11/20/2024	Southwestern Committee on Political Education				\$1,000.00
	-	Contributor address; City; State; Zip Code				- ,
			1			
		1	1			
		Amarillo, TX 79101-2510	1			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
		,	1			
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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 97/120 Rpt: 101/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	athan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/10/2024	Souza, Randy		\$50.0
	6 Contributor address; City; State; Zip Code		
	Saratoga, CA 95070-5751		
	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/12/2024	Stahl, Linda		\$100.0
	Contributor address; City; State; Zip Code		
	Dallas, TX 75205-2913		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	,
Attorney		Carter Arnett Bennett &	Perez PLLC
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/13/2024	Steinhart, Ronald		\$500.0
	Contributor address; City; State; Zip Code		
	Dallas, TX 75230-3055		
	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/04/2024	Sterling, Karen		\$10.0
	Contributor address; City; State; Zip Code		
	Cedar Creek, TX 78612-3593		
-	pation / Job title (See Instructions)	Employer (See Instructions	s)
Not employe	ed	Not employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
12/14/2024	Sterling, Karen		\$10.0
	Contributor address; City; State; Zip Code		
	Cedar Creek, TX 78612-3593		
	upation / Job title (See Instructions)	Employer (See Instructions	5))
Not employe	ed	Not employed	

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 98/120 Rpt: 102/199	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Johnson, Na	than M. (The Honorable)			00081605	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/28/2024	Swift, Galvin				\$10.53
	I	6 Contributor address; City; State; Zip Code		1		
		Dallas, TX 75209-2822				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/28/2024	Swift, Galvin				\$10.53
	I	Contributor address; City; State; Zip Code		1		
		1				
		1				
L		Dallas, TX 75209-2822				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/28/2024	Swift, Galvin				\$10.53
	I	Contributor address; City; State; Zip Code		1		
		Dallas, TX 75209-2822				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/28/2024	Swift, Galvin				\$10.53
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75209-2822				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/28/2024	Swift, Galvin				\$10.53
	I	Contributor address; City; State; Zip Code		1		
		1				
		Dallas, TX 75209-2822				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 99/120 Rpt: 103/199)
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		than M. (The Honorable)			00081605	,
4	Date	5 Full name of contributor X out-of-state PAC (ID#	<u> </u>	7	Amount of Contribution (\$)	
	08/21/2024	Sysco Corp Good Government Committee Inc.				\$1,500.00
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77077-2025				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
⊨	Date	Full name of contributor Out-of-state PAC (ID#	:)	Γ	Amount of Contribution (\$)	
	10/05/2024	Tarpley, Gloria M	/			\$1,000.00
				•		. ,
		Dallas, TX 75218-4330				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#		Γ	Amount of Contribution (\$)	
	12/13/2024	Tasian, Diane				\$200.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75219-4414				
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	07/01/2024	Taylor, John				\$10.00
		Contributor address; City; State; Zip Code				
		D. II TV 75000 4400				
		Dallas, TX 75238-4129		Ĺ		
	Principal occu Sales	pation / Job title (See Instructions)	Employer (See Instructions Alliance	5)		
				_		
	Date	Full name of contributor out-of-state PAC (ID#)		Amount of Contribution (\$)	*****
	08/04/2024	Taylor, John				\$20.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75238-4129				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Sales		Alliance	וי		
⊢	54.00					
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The Inst	ruction Guide explains how to co	mplete this form.	1	1 Total pages Schedule A1: Sch: 100/120 Rpt: 104/199	
2 FILER NA				3 Filer ID (Ethics Commission F	-ilers)
	Nathan M. (The Honorable)			00081605	
4 Date	5 Full name of contributor out-	of-state PAC (ID#:) 7	7 Amount of Contribution (\$)	
10/13/202					\$25.00
	6 Contributor address; City; State; Zip	Code			
	Dallas, TX 75238-4129				
	ccupation / Job title (See Instructions)		See Instructions)		
Sales		Alliance			
Date	Full name of contributor 🗌 out-	of-state PAC (ID#:)	Amount of Contribution (\$)	
12/14/202	4 Taylor, Tom				\$25.00
	Contributor address; City; State; Zip				
	Dallas, TX 75243-6506				
-	ccupation / Job title (See Instructions)		See Instructions)		
Not Empl	yed	Not Employ	yed		
Date	Full name of contributor out-	of-state PAC (ID#:)	Amount of Contribution (\$)	
07/02/202					\$25.00
	Contributor address; City; State; Zip				
	Dallas, TX 75243-6506				
	ccupation / Job title (See Instructions)		See Instructions)		
Not Empl	- -	Not Emplo	yeu		
Date		of-state PAC (ID#:)	Amount of Contribution (\$)	
07/03/202					\$25.00
	Contributor address; City; State; Zip	Code			
	Dallas, TX 75243-6506				
Principal o	ccupation / Job title (See Instructions)	Employer (S	See Instructions)		
Not Empl		Not Emplo			
	-		<u> </u>		
Date		of-state PAC (ID#:)	Amount of Contribution (\$)	ቀን⊑ በበ
07/18/202					\$25.00
	Contributor address; City; State; Zip	Code			
	Dallas, TX 75243-6506				
Principal o	ccupation / Job title (See Instructions)	Employer (S	See Instructions)		
Not Empl		Not Emplo			

				1	Total pages Schedule A1:	
		ction Guide explains how to complete this fo	orm.		Sch: 101/120 Rpt: 105/1	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
		athan M. (The Honorable)			00081605	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/15/2024	Tenaska Employees Texas PAC				\$2,000.00
		6 Contributor address; City; State; Zip Code				
		Omaha, NE 68154-5212				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
				_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/14/2024					\$20,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701-2175				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
		, , , , , , , , , , , , , , , , , , ,	p.0,c. (,	,		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/13/2024	Texas Academy of Physician Assistants PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		_				
		Austin, TX 78737-4707				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Data	Full name of contributor Out-of-state PAC (ID#:		_	Amount of Contribution (¢)	
	Date 11/20/2024	Full name of contributor out-of-state PAC (ID#: Texas Aggregates & Concrete AssnPolitical Act			Amount of Contribution (\$)	\$2,500.00
						φ2,300.00
		Contributor address; City; State; Zip Code				
		Round Rock, TX 78680-0459				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/15/2024	Texas Apartment Association PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		1 TV 20201 1051				
	Dringingloog	Austin, TX 78701-1951	Employer (Cool Instructions	Ĺ		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 102/120 Rpt: 106/19	99
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
_	Johnson, Na	athan M. (The Honorable)	!		00081605	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/13/2024	Texas Assisted Living Association PAC				\$2,000.00
		6 Contributor address; City; State; Zip Code				
			ļ			
		Austin, TX 78759-8423				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
—	Date	Full name of contributor Out-of-state PAC (ID#:		_	Amount of Contribution (\$)	
	11/27/2024	Full name of contributor out-of-state PAC (ID#: Texas Assn. Of Pawnbrokers PAC	/		Amount of Contribution (\$)	\$1,000.00
						ψ1,000.00
		Contributor address, City, State, Zip Code	ļ			
		1	ļ			
		Frisco, TX 75034-3084	ļ			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
			I			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/13/2024	Texas Association for Interior Design PAC	ļ			\$1,000.00
		Contributor address; City; State; Zip Code				
		1	ļ			
			ļ			
	Duineiral agai	Houston, TX 77263-0867	Employer (Case Instructions	ŕ		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))		
	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	11/27/2024	Texas Association of Staffing PAC	ļ			\$1,000.00
		Contributor address; City; State; Zip Code				
		1	ļ			
		Austin, TX 78701-1634	ļ			
-	Princinal occu	apation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	Fillopa occa)		
-	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/15/2024	Texas Bankers Association PAC				\$5,000.00
		Contributor address; City; State; Zip Code				
		1	ļ			
		Augustia TV 20201 0001	ļ			
<u> </u>	Dringingloog	Austin, TX 78701-2321	Employer (Cool Instructions	Ĺ		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))		
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The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 103/120 Rpt: 107/19)9
2 FILER NAME			3 Filer ID (Ethics Commissio	n Filers)
Johnson, Na	athan M. (The Honorable)		00081605	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
12/02/2024	Texas Beverage Alliance			\$1,000.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78701-2165			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/13/2024	Texas Capital Bank PAC			\$5,000.00
	Contributor address; City; State; Zip Code			
	5			
Driv single easy	Dallas, TX 75201-1985			
Principai occu	pation / Job title (See Instructions)	Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/20/2024	Texas College of Emergency Physicians			\$1,500.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701-1665			
Principal occur	Austin, 1X 78701-1005 pation / Job title (See Instructions)	Employer (See Instructions)	<u>\</u>	
			, 	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/27/2024	Texas Cornerstone Credit Union League PAC			\$2,500.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75265-5147			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
г шора осса)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/20/2024	Texas Dairymen PAC			\$1,000.00
	Contributor address; City; State; Zip Code			
Principal occu	Austin, TX 78711-3182	Employer (See Instructions)		
Principal occu		Employer (See Instructions))	
Principal occu	Austin, TX 78711-3182	Employer (See Instructions))	

	The Instru	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 104/120 Rpt: 108/19	99
2	FILER NAME Johnson, Na	than M. (The Honorable)		3	Filer ID (Ethics Commission 00081605	on Filers)
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	11/27/2024	Texas Dental Association PAC				\$1,000.00
	I	6 Contributor address; City; State; Zip Code				
	l	1				
		Austin, TX 78704-3644				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/15/2024	Texas Homecare & Hospice PAC				\$1,000.00
	I	Contributor address; City; State; Zip Code				
	I	1				
	l	Austin, TX 78731-1633				
<u> </u>	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	 :)		
	T finoipai oosa)		
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	10/15/2024	Texas Instruments Incorporated PAC				\$1,000.00
	l	Contributor address; City; State; Zip Code				
		Dallas, TX 75243-0592		L		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/15/2024	Texas Land & Title Association PAC				\$2,500.00
	I	Contributor address; City; State; Zip Code				
	I	1				
	l	Austin, TX 78703-4775				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
	·	· · ·		,		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/20/2024	Texas Leads PAC				\$1,000.00
	I	Contributor address; City; State; Zip Code				
	I	1				
	l	Austin, TX 78767-0279				
<u> </u>	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
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The Instru	ction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 105/120 Rpt: 109/19	99
2 FILER NAME Johnson, Na	athan M. (The Honorable)			Filer ID (Ethics Commissio	n Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
12/13/2024	Texas McDonald's Operators Association PAC II			······································	\$1,000.00
	6 Contributor address; City; State; Zip Code		-		• •
Drincipal occu	Athens, TX 75751-2143	Employer (See Instructions)			
8 Plincipai occu		9 Employer (See Instructions)	5)		
Date	Full name of contributor out-of-state PAC (ID#:)] /	Amount of Contribution (\$)	
10/15/2024	Texas Medical Association PAC				\$1,000.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78701-1624				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	s)		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
11/20/2024	Texas Mortgage Bankers PAC				\$3,000.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78701-2668				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	<u>.</u> s)		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
10/15/2024	Texas Oil and Gas Association Good Governme	ent Committee			\$3,000.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78701-1823				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	s)		
Date	Full name of contributor out-of-state PAC (ID#:)	Ţ,	Amount of Contribution (\$)	
10/15/2024	Texas Optometric PAC				\$2,000.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78705-2004				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	I				

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 106/120 Rpt: 110/19	99
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		athan M. (The Honorable)			00081605	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/27/2024	Texas Orthopaedic Political Action Committee				\$1,500.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78701-1665				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/20/2024	Texas Pharmacy Association PAC				\$1,000.00
	I	Contributor address; City; State; Zip Code				
	I					
		Austin, TX 78757-8034				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))		
=	Date	Full name of contributor Out-of-state PAC (ID#:		_	Amount of Contribution (\$)	
	10/15/2024	Texas Radiological Society PAC				\$2,000.00
	10,10,202	Contributor address; City; State; Zip Code				Ψ2,000.02
	l					
		San Antonio, TX 78257-1160				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))		
_	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/27/2024	Texas SANDS PAC				\$4,500.00
		Contributor address; City; State; Zip Code				
	I					
		Austin, TX 78701-4093				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))		
╞	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	10/15/2024	Texas State Association Of Fire Fighters PAC			· · · · · · · · · · · · · · · · · · ·	\$1,500.00
	I	Contributor address; City; State; Zip Code				
	I					
L		Austin, TX 78701-2170				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))		
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_	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 107/120 Rpt: 111/19	99
2	FILER NAME			3	Filer ID (Ethics Commissio	
		athan M. (The Honorable)		ľ	00081605	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/20/2024	Texas State University System PAC				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78701-2434				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/02/2024	Texas Statewide Telephone Cooperative Inc PA	С			\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701-1865				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor Out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	12/13/2024	Texas Towing And Storage Assn. PAC	,			\$1,000.00
						, ,
		Spring, TX 77386-1024				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/15/2024	Texas Trial Lawyers Association PAC				\$2,500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701-1814				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/20/2024	Texas Trial Lawyers Association PAC				\$2,500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701-1814				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
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The Ins	truction Guide explains how to complete	e this form.	1 Total pages Schedule A1: Sch: 108/120 Rpt: 112/199
2 FILER NA	ME		3 Filer ID (Ethics Commission Filers)
	, Nathan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state F	PAC (ID#:)	7 Amount of Contribution (\$)
10/15/20			\$2,500.00
	6 Contributor address; City; State; Zip Code		1
	New Braunfels, TX 78132-3478		
8 Principal o	occupation / Job title (See Instructions)	9 Employer (See Instructions	5)
Date	Full name of contributor X out-of-state F	PAC (ID#: <u>C00123612</u>)	Amount of Contribution (\$)
10/15/20	24 Textron Inc. Political Action Committee		\$500.00
	Contributor address; City; State; Zip Code		
	Fort Worth, TX 76101-0482		
Principal of	occupation / Job title (See Instructions)	Employer (See Instructions	s)
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)
07/01/20			\$10.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75248-3120		
Principal o	occupation / Job title (See Instructions)	Employer (See Instructions	s)
Not Emp	loyed	Not Employed	
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)
12/14/20	•		\$190.00
	Contributor address; City; State; Zip Code		1
	Austin, TX 78731-2012		
	occupation / Job title (See Instructions)	Employer (See Instructions	s)
Not Emp	loyed	Not Employed	
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)
08/20/20			\$25.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75238-2533		
Brincipal	Datas, 1X 752552555 Deccupation / Job title (See Instructions)	Employer (See Instructions	~
Consulta		Ruhter & Reynolds Inc.	
		Runter & Reynolds me.	

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 109/120 Rpt: 113/19	99
2	FILER NAME			3	Filer ID (Ethics Commissio	
<u>د</u>		athan M. (The Honorable)			00081605	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/10/2024	Todd, Anne				\$25.00
		6 Contributor address; City; State; Zip Code				
		Dallas, TX 75230-3119				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
				_		
	Date	Full name of contributor X out-of-state PAC (ID#: <u>C</u>	;00542365)		Amount of Contribution (\$)	
	10/15/2024	Toyota Motor North America PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		1				
		Washington, DC 20004-2801				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/10/2024	Tuthill, David				\$50.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75230-1929				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date	Full name of contributor X out-of-state PAC (ID#: C	00571141)	Γ	Amount of Contribution (\$)	
	12/02/2024	UCB Inc. PAC				\$500.00
		Contributor address; City; State; Zip Code				
		Sausalito, CA 94965-3321				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date	Full name of contributor X out-of-state PAC (ID#: <u>C</u>)		Amount of Contribution (\$)	
	12/02/2024	US Oncology Inc. Good Government Committee				\$1,000.00
		Contributor address; City; State; Zip Code				
		The Woodlands, TX 77380-1975				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
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	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 110/120 Rpt: 114/19	99
2	FILER NAME			3	Filer ID (Ethics Commissio	
		than M. (The Honorable)			00081605	,
4	Date	5 Full name of contributor out-of-state PAC (ID	#:)	7	Amount of Contribution (\$)	
	12/13/2024	USAA Employee Political Action Fund				\$1,000.00
		6 Contributor address; City; State; Zip Code		1		
	I					
	I					
		Austin, TX 78701-2132				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	3)		
	Date	Full name of contributor out-of-state PAC (ID:		Γ	Amount of Contribution (\$)	
	10/15/2024	Union Pacific Corp. Fund For Effective Govern	nment			\$3,000.00
	I			ł		
	I					
	I					
		Washington, DC 20005-6621				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)		
	Date	Full name of contributor X out-of-state PAC (ID	#: <u>C00274431</u>)	Ē	Amount of Contribution (\$)	
	11/27/2024	UnitedHealth Group PAC				\$2,000.00
	I	Contributor address; City; State; Zip Code	Ţ	1		
	I					
	I	Lipplying MN EE242 0664				
	Dringingl occu	Hopkins, MN 55343-9664 pation / Job title (See Instructions)	Employer (See Instructions	$\sum_{i=1}^{n}$		
	Ρπητιμαί στου		Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID:		Γ	Amount of Contribution (\$)	
	12/13/2024	Valero Energy Corporation PAC				\$1,000.00
	I	Contributor address; City; State; Zip Code		1		
	I					
	I					
		San Antonio, TX 78269-6000				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
				—		
	Date	Full name of contributor Out-of-state PAC (ID)	#:)		Amount of Contribution (\$)	÷==> 00
	10/11/2024	Vallot, Colette				\$750.00
	Contributor address; City; State; Zip Code					
	I					
	l	Dallas, TX 75219-7905				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 3)		
	Consultant		Self employed	,		

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1:	
					Sch: 111/120 Rpt: 115/19	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
_		athan M. (The Honorable)			00081605	
4	Date	5 Full name of contributor out-of-state PAC (ID#:))	7	Amount of Contribution (\$)	* 5.00
	07/01/2024	Van Blargan, Joseph				\$5.00
		6 Contributor address; City; State; Zip Code				
		Dallas, TX 75209-7306				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> 5)		
	Not Employe		Not Employed	,		
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	08/16/2024	Vestal, Howard				\$50.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75205-2046				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
L	Not Employe	3d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/14/2024	Vestal, Howard				\$50.00
		Contributor address; City; State; Zip Code]		
		Dallas, TX 75205-2046				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	5)		
╞	Date)	Γ	Amount of Contribution (\$)	
	12/14/2024	Villarreal, Beverly				\$50.00
		Contributor address; City; State; Zip Code		{		400.00
		Austin, TX 78737-1343				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/07/2024	Villarreal, Massey				\$2,587.75
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77479-6716		Ĺ		
	Principal occu Business ow	upation / Job title (See Instructions)	Employer (See Instructions) Precision Task Group	5)		
L	Business ow					

The Instruction Guide explains how to complete this form. Sch: 112/120 Rpt: 116/199				I
Johnson, Nathan M. (The Honorable) 00081805 4 Date 5 Full name of contributor out of state PAC (Dettermine of Vistra Corp. 7 Amount of Contribution (\$) 08/21/2024 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (\$) \$10,000.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (Dettermine) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (Dettermine) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (Dettermine) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Still employed Date Full name of contributor out-of-state PAC (Dettermine) Amount of Contribution (\$) 12/13/2024 Full name of contributor out-of-state PAC (Dettermine) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Not Employed Amount of Contribution (\$) \$10.00 Of/17/2024 Full name of	The Instru	ction Guide explains how to complete	e this form.	1 Total pages Schedule A1: Sch: 112/120 Rpt: 116/199
4 Date 5 Full name of contributor oue-d-state PAC (DE:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
08/21/2024 Vistra Employee Political Action Committee of Vistra Corp. \$10,000.00 6 Contributor address; City; State; Zip Code \$10,000.00 8 Principal occupation / Job tite (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (DBF Amount of Contribution (\$) 12/14/2024 Full name of contributor out-of-state PAC (DBF Amount of Contribution (\$) 22/14/2024 Full name of contributor out-of-state PAC (DBF Amount of Contribution (\$) 212/14/2024 Full name of contributor out-of-state PAC (DBF Amount of Contribution (\$) 212/14/2024 Full name of contributor out-of-state PAC (DBF Amount of Contribution (\$) 212/13/2024 Full name of contributor out-of-state PAC (DBF Amount of Contribution (\$) 12/13/2024 Full name of contributor out-of-state PAC (DBF Amount of Contribution (\$) 9 Full name of contributor out-of-state PAC (DBF Amount of Contribution (\$) 07/17/2024 Full name of contributor out-of-state PAC (DBF Amount of Contribution (\$) 07/17/2024 Full name of contributor out-of-state PAC (DBF Amount of Contributio	Johnson, Na	than M. (The Honorable)		
6 Contributor address; City: State; Zip Code Irving, TX 75039-2479 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 28 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 21/14/2024 Full name of contributor out-of-state PAC (IDI:	4 Date	5 Full name of contributor out-of-state P/	AC (ID#:)	7 Amount of Contribution (\$)
6 Contributor address; City; State; Zip Code Inving, TX 75039-2479 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#	08/21/2024			\$10,000.00
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Vogel, Garrett aut-of-state PAC (Dor) Amount of Contribution (\$) 12/14/2024 Vogel, Garrett \$350.00 Contributor address; City; State; Zip Code amount of Contribution (\$) Date Dallas, TX 75240-1123 Employer (See Instructions) Corporate financial consulting Self employed Date Full name of contributor out-of-state PAC (Dor) 12/13/2024 Full name of contributor out-of-state PAC (Dor) 12/13/2024 Full name of contributor out-of-state PAC (Dor) 12/13/2024 Full name of contributor out-of-state PAC (Dor) Not Employed Amount of Contribution (\$) \$50.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Not Employed Date Full name of contributor out-of-state PAC (Dor) Amount of Contribution (\$) \$10.00 7/17/2024 Full name of contributor out-of-state PAC (Dor) Amount of Contribution (\$) \$10.00 08/17/2024 Full name of contrib		6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Vogel, Garrett aut-of-state PAC (Dor) Amount of Contribution (\$) 12/14/2024 Vogel, Garrett \$350.00 Contributor address; City; State; Zip Code amount of Contribution (\$) Date Dallas, TX 75240-1123 Employer (See Instructions) Corporate financial consulting Self employed Date Full name of contributor out-of-state PAC (Dor) 12/13/2024 Full name of contributor out-of-state PAC (Dor) 12/13/2024 Full name of contributor out-of-state PAC (Dor) 12/13/2024 Full name of contributor out-of-state PAC (Dor) Not Employed Amount of Contribution (\$) \$50.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Not Employed Date Full name of contributor out-of-state PAC (Dor) Amount of Contribution (\$) \$10.00 7/17/2024 Full name of contributor out-of-state PAC (Dor) Amount of Contribution (\$) \$10.00 08/17/2024 Full name of contrib				
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Vogel, Garrett aut-of-state PAC (Dor) Amount of Contribution (\$) 12/14/2024 Vogel, Garrett \$350.00 Contributor address; City; State; Zip Code amount of Contribution (\$) Date Dallas, TX 75240-1123 Employer (See Instructions) Corporate financial consulting Self employed Date Full name of contributor out-of-state PAC (Dor) 12/13/2024 Full name of contributor out-of-state PAC (Dor) 12/13/2024 Full name of contributor out-of-state PAC (Dor) 12/13/2024 Full name of contributor out-of-state PAC (Dor) Not Employed Amount of Contribution (\$) \$50.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Not Employed Date Full name of contributor out-of-state PAC (Dor) Amount of Contribution (\$) \$10.00 7/17/2024 Full name of contributor out-of-state PAC (Dor) Amount of Contribution (\$) \$10.00 08/17/2024 Full name of contrib				
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Contributor address; City, State; Zip Code	12/14/2024	Vogel, Garrett		\$350.00
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Contributor address; City; State; Zip Code Dallas, TX 75214-2122 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Date	Full name of contributor 🔲 out-of-state P/	AC (ID#:)	Amount of Contribution (\$)
Dallas, TX 75214-2122 Principal occupation / Job title (See Instructions) Employer (See Instructions)	08/17/2024	Wade, Elise		\$10.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State; Zip Code	·]	
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		Dallas, TX 75214-2122		
Not Employed Not Employed				s)
	Not Employe	؛d	Not Employed	
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The Instru	uction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 113/120 Rpt: 117/199)
2 FILER NAME			3	Filer ID (Ethics Commission	Filers)
Johnson, N	athan M. (The Honorable)			00081605	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
09/17/2024	Wade, Elise				\$10.00
	6 Contributor address; City; State; Zip Code		1		
	Dallas, TX 75214-2122				
8 Principal occu Not Employ	upation / Job title (See Instructions) red	9 Employer (See Instructions Not Employed	s)		
Date	Full name of contributor out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
10/17/2024	Wade, Elise				\$10.00
	Contributor address; City; State; Zip Code		1		
Dringingliggs	Dallas, TX 75214-2122		Ĺ		
Principal occu Not Employ	upation / Job title (See Instructions)	Employer (See Instructions Not Employed	S)		
			1		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 10.00
11/17/2024	·				\$10.00
	Contributor address; City; State; Zip Code				
	Dallas, TX 75214-2122				
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
Not Employ		Not Employed	-,		
Date	Full name of contributor X out-of-state PAC (ID#:	C00160770)	Τ	Amount of Contribution (\$)	
12/13/2024					\$500.00
	Contributor address; City; State; Zip Code		•		
	Washington, DC 20005-4764				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
			1	· · · · · · · · · · · · · · · · · · ·	
Date 09/06/2024	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$20.00
09/00/2024					ΦΖΟ.ΟΟ
	Contributor address; City; State; Zip Code				
	Dallas, TX 75243-6153				
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	<u>ار</u> ج)		
ALJ	, , , , , , , , , , , , , , , , , , ,	TWC	5,		

The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 114/120 Rpt: 118/199
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Johnson, Na	athan M. (The Honorable)		00081605
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/17/2024	Walter, Christopher		\$20.00
	6 Contributor address; City; State; Zip Code		1
	Dallas, TX 75243-6153		
8 Principal occu ALJ	upation / Job title (See Instructions)	9 Employer (See Instructions TWC	\$)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/11/2024	Ward, Monica		\$100.00
	Contributor address; City; State; Zip Code		1
	Richardson, TX 75080-2913		
-	upation / Job title (See Instructions)	Employer (See Instructions	3)
Director		Christus health	.
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/13/2024	Watkins, Doris		\$5.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76110-1741		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> S)
Not Employe		Not Employed	,
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/12/2024	Weatherall, Paul		\$150.00
	Contributor address; City; State; Zip Code		1
	Dallas, TX 75230-3256		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
Physician		UT Southwestern	·/
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/13/2024	Webre, Bernadette		\$50.00
	Contributor address; City; State; Zip Code Colleyville, TX 76034-4121		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	Σ δ)
Not employe		Not employed	

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 115/120 Rpt: 119/19	99
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Johnson, Na	athan M. (The Honorable)			00081605	
	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/27/2024	Weekley, Richard				\$5,000.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77027-9137				
	Principal occu Chairman	ipation / Job title (See Instructions)	9 Employer (See Instructions Weekley Development	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/10/2024	Weller, Elizabeth				\$25.00
		Contributor address; City; State; Zip Code				
		Carrollton, TX 75006-2669				
	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	I;)		
	Attorney		LGBS			
-	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/13/2024	West, Jay				\$50.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75219-4052				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Comml Real		Self employed	-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	±050.00
	11/27/2024	Wheaton, Peggy				\$250.00
		Contributor address; City; State; Zip Code				
		Highland Village, TX 75077-7237				
┝─	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	-					
⊨	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/20/2024	Wholesale Beer Distributors of Texas				\$1,500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701-2434				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 116/120 Rpt: 120/199	
2	FILER NAME			3	Filer ID (Ethics Commission F	-ilers)
	Johnson, Na	than M. (The Honorable)			00081605	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/05/2024	Wilder, Laura				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Corland TV 75042 2421				
Q	Principal occu	Garland, TX 75043-3431 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
ľ	Not employe		Not employed	,		
_	Date			Г	Amount of Contribution (\$)	
	10/10/2024	Full name of contributor out-of-state PAC (ID#: Wilder, Laura)			\$10.00
	10/10/2024					φ10.00
		Contributor address, City, State, Zip Code				
		Garland, TX 75043-3431				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not employe	d	Not employed			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	07/26/2024	Williamson, Ellen				\$5.00
		Contributor address; City; State; Zip Code		1		
		In ing TV 75020 2224				
	Dringing ogg	Irving, TX 75039-3234 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Attorney	pation 7 Job tille (See Instructions)	Self Employed	>)		
		Full name of contributor Out-of-state PAC (ID#:		<u> </u>	Amount of Contribution (ft)	
	Date 08/26/2024	Full name of contributor out-of-state PAC (ID#: Williamson, Ellen)		Amount of Contribution (\$)	\$5.00
	00/20/2024	Contributor address; City; State; Zip Code				Ψ3.00
		Contributor address, City, State, Zip Code				
		Irving, TX 75039-3234				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Self Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/26/2024	Williamson, Ellen				\$5.00
		Contributor address; City; State; Zip Code		1		
		In ting TX ZE020 2224				
	Drinoinal as	Irving, TX 75039-3234	Employer (Cashatturting			
	Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self Employed	5)		
	Automey		Sell Linployed			

The Instru	ction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 117/120 Rpt: 121/199	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Johnson, Næ	athan M. (The Honorable)	00081605	
4 Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7 Amount of Contribution (\$)
10/26/2024	Williamson, Ellen		\$5.00
	6 Contributor address; City; State; Zip Code		1
	Irving, TX 75039-3234		
8 Principal occu Attorney	upation / Job title (See Instructions)	9 Employer (See Instructions Self Employed	3)
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
11/26/2024	Williamson, Ellen		\$5.00
	Contributor address; City; State; Zip Code		
	Irving, TX 75039-3234		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
Attorney		Self Employed	<i>"</i>
Date	Full name of contributor Out-of-state PAC (ID)	#:)	Amount of Contribution (\$)
07/12/2024	Wolf, Whitney	<i>n</i> ,	\$25.00
	Contributor address; City; State; Zip Code		4
	Dallas, TX 75243-6308		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> \$)
Not employe		Not employed	
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
08/12/2024	Wolf, Whitney		\$25.00
	Contributor address; City; State; Zip Code		1
	Dallas, TX 75243-6308		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 6)
Not employe		Not employed	,
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
09/12/2024	Wolf, Whitney		\$25.00
	Contributor address; City; State; Zip Code		1
D in single and	Dallas, TX 75243-6308		Į
	upation / Job title (See Instructions)	Employer (See Instructions	3)
Not employe	jd	Not employed	

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 118/120 Rpt: 122/199		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Johnson, Na	athan M. (The Honorable)	00081605		
4 Date 10/12/2024	5 Full name of contributor out-of-state PAC (ID#: Wolf, Whitney)	7 Amount of Contribution (\$) \$25.0	
	6 Contributor address; City; State; Zip Code			
	Dallas, TX 75243-6308			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;) ;)	
Not employe	ed .	Not employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/12/2024	Wolf, Whitney		\$25.0	
	Contributor address; City; State; Zip Code			
	Dallas, TX 75243-6308			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
Not employe	ed .	Not employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/06/2024	Wright, Joe Nathan		\$10.0	
	Contributor address; City; State; Zip Code		•	
	Richardson, TX 75081-5550			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>۱</u> ۵)	
Attorney		JN Wright & Associates		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/12/2024	Wright, Joe Nathan		\$10.0	
	Contributor address; City; State; Zip Code		•	
	Richardson, TX 75081-5550			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Attorney		JN Wright & Associates	PC	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/24/2024	Wrinkle, William		\$50.0	
1	Contributor address; City; State; Zip Code		•	
1				
1				
	Richardson, TX 75080-6933			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;) 	
Software De	veloper	Spacee		

The Instru	ction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 119/120 Rpt: 123/199			
2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
Johnson, Na	than M. (The Honorable)	00081605			
4 Date	5 Full name of contributor Out-of-state PAC (ID	D#:)	7 Amount of Contribution (\$)		
12/13/2024	Yaeger, Suzanne		\$50.00		
	6 Contributor address; City; State; Zip Code		1		
	Dallas, TX 75244-7738				
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Not Employe	}d	Not Employed			
Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of Contribution (\$)		
11/27/2024	Young, Sharon		\$2,500.00		
	Contributor address; City; State; Zip Code		•		
	Dallas, TX 75220-2024				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Investor		Quadrant Capital Partne	ers		
Date	Full name of contributor Out-of-state PAC (ID)	Amount of Contribution (\$)		
09/03/2024	Zahaluk, Karen	····· <u></u> .	\$10.00		
	Contributor address; City; State; Zip Code				
	Dallas, TX 75243-8278				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Dir of Admin	& Operations	Unlocking DOORS			
Date	Full name of contributor out-of-state PAC (ID)#:)	Amount of Contribution (\$)		
07/31/2024	Zatyko, Steven		\$100.00		
	Contributor address; City; State; Zip Code				
	Coppell, TX 75019-7309				
-	pation / Job title (See Instructions)	Employer (See Instructions	s)		
IT Consultan	ıt	Self employed			
Date	Full name of contributor 🛛 out-of-state PAC (ID)#:)	Amount of Contribution (\$)		
08/31/2024	Zatyko, Steven		\$100.00		
	Contributor address; City; State; Zip Code	1			
	Coppell, TX 75019-7309				
	pation / Job title (See Instructions)	Employer (See Instructions	s)		
IT Consultan	ıt	Self employed			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 **1** Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 120/120 Rpt: 124/199 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Johnson, Nathan M. (The Honorable) 00081605 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 10/30/2024 Zatyko, Steven \$100.00 6 Contributor address; City; State; Zip Code Coppell, TX 75019-7309 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **IT Consultant** Self employed

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A	2
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The Instru	iction Guide explains how to complete this f		1 Total pages Schedule A2: Sch: 1/2 Rpt: 125/199					
2 FILER NAME		3	3 Filer ID (Ethics Commission Filers)					
	athan M. (The Honorable)		00081605					
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$					
5 Date	6 Full name of contributor out-of-state PAC (ID#:)		Amount of contribution (\$)	9 In-kind contribution description			
11/13/2024					Fundraising event			
	7 Contributor address; City; State; Zip Code				catering, beverage and music			
	Irving, TX 75061-2130			Check if travel o	utside of Texas. Complete Schedule T.			
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	i-jui	DICIAL) (See ir	nstructions)			
Composites	Manufacturing Engineer	Qarbon Aerospace	è					
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FO	R JUDICIAL)	(See instructions)			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's s	spouse (if any) (I	FOR JUDICIAL)			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)		Amount of	In-kind contribution			
11/14/2024	Moak Casey, LLC			contribution (\$)	description Fundraising event			
	Contributor address; City; State; Zip Code				food/beverage and venue			
					rental			
	Austin, TX 78701			ا ا				
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	1-111	Check if travel outside of Texas. Complete Schedule TJUDICIAL) (See instructions)				
Fincipal occi			1-301					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)		Amount of	In-kind contribution			
10/10/2024	Montford, John			contribution (\$)	description Fundraising event			
	Contributor address; City; State; Zip Code			\$330.00	advertising			
	San Antonio, TX 78257		<u> </u>		utside of Texas. Complete Schedule T.			
Principal occi President/C	upation / Job title (FOR NON-JUDICIAL) (See instructions) EO	Employer (FOR NON JTM Consulting	1-JUI	DICIAL) (See ir	nstructions)			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FO	R JUDICIAL)	(See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)						
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE	A2
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	The Instru	ction Guide explains how to complete this f	1	1 Total pages Schedule A2: Sch: 2/2 Rpt: 126/199				
2	FILER NAME		3	Filer ID (Ethics Commission Filers)				
	Johnson, Na	athan M. (The Honorable)			00081605			
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$					
5	Date 11/14/2024	 Full name of contributor out-of-state PAC (ID#: Montford, John Contributor address; City; State; Zip Code San Antonio, TX 78257)	8	Amount of contribution (\$) \$350.00 Fundraising event advertising Check if travel outside of Texas. Complete Schedule T.			
10	Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	DN-JUDICIAL) (See instructions)				
	President/C	EO	JTM Consulting					
12	Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL) (See instructions)					
14	Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
16	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								
	Total pages Schedule F1:								
	Sch: 1/61 Rpt:	Johnson, Nathan M. (The Honorable) 00081605							
4	Date 12/17/2024	5 Payee name 23rd Senatorial District Tejano Democrats							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$300.00								
-	DUDDOSE								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Expenditure (b) Description Check if Austin, TX, officeholder living expense Event contribution Event contribution Event contribution									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	07/23/2024	AT&T							
⊢	Amount (\$)	Payee address; City; State; Zip Code							
	\$65.60	208 S Akard St							
		Ste 2954							
		Dallas, TX 75202-4206							
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. X Check if Austin, TX, officeholder living expense Austin apartment utilities 							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	08/22/2024	AT&T							
⊢	Amount (\$)	Payee address; City; State; Zip Code							
	\$65.60	208 S Akard St							
		Ste 2954							
		Dallas, TX 75202-4206							
⊢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF	Office Overhead/Rental Expense							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2 [3	Filer ID (Ethics Commission Filers)	
-	Sch: 2/61 Rpt:		Johnson, Nathan M. (The Honorable)				00081605	
4	Date 09/23/2024		Payee name AT&T					
6	Amount (\$) \$65.60	7 Payee address; City; State; Zip Code 65.60 208 S Akard St Ste 2954 Dallas, TX 75202-4206 State; Zip Code						
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description 0 Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Austin apartment utilities						officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held	
	Date	F	Payee name					
	10/24/2024	/	AT&T					
	Amount (\$) \$65.60	2	Payee address; City; State 208 S Akard St Ste 2954 Dallas, TX 75202-4206	e; Zip Co	de 			
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense				hedule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Austin apartment utilities			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held	
	Date	F	Payee name					
	11/25/2024		AT&T					
	Amount (\$) \$65.60	2	Payee address; City; State 208 S Akard St Ste 2954 Dallas, TX 75202-4206	e; Zip Co	de			
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sc Office Overhead/Rental Expense	hedule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense t utilities	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense al Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 3/61 Rpt:		Johnson, Nathan M. (The F	Ionorable)				00081605
4	Date 07/01/2024		Payee name ActBlue					
6	Amount (\$) \$1,071.77		Payee address; City; 366 Summer St Somerville, MA 02144-3132		; Zip Coc	de		
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card processing fees - 7/1/24-12/14/2						, officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	С	Office soug	yht		Office held
	Date		Payee name					
	07/31/2024		Allen, Brenda					
	Amount (\$) \$1,000.00		Payee address; City; 1010 N Beckley Ave	State;	; Zip Coo	de		
			Dallas, TX 75203-1331					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at t Salaries/Wages/Contract La		edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense Y
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	С	Dffice soug	ght		Office held
	Date		Payee name					
	08/31/2024		Allen, Brenda					
	Amount (\$) \$1,000.00		Payee address; City; 1010 N Beckley Ave	State;	; Zip Coo	de		
			Dallas, TX 75203-1331		i			
	PURPOSE OF EXPENDITURE		Category (See Categories listed at t Salaries/Wages/Contract Li		edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense Y
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	jht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl		Office Over Polling Expe Printing Exp Salaries/Wa	head/ ense bense ages/	Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Sabadula E1:	2	FILER NAME	ansn	000 10 00.1	Ihic:		3	Filer ID (Ethics Commission Filers)
1	Total pages Schedule F1: Sch: 4/61 Rpt:	2	Johnson, Nathan M. (The Honorat	ole)				3	Filer ID (Ethics Commission Filers) 00081605
4	Date	5	Payee name						
	09/30/2024		Allen, Brenda						
6	Amount (\$)	7	Payee address; City; S	State;	Zip Cod	le			
	\$1,000.00		1010 N Beckley Ave						
			Dallas, TX 75203-1331						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of the	nis scheo	dule)	(b)	Description		
	EXPENDITURE		Salaries/Wages/Contract Labor						de of Texas. Complete Schedule T.
							Campaign sa		officeholder living expense
							Campaign Sa	iaij	ý
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Of	ffice soug	ht			Office held
	Date		Payee name						
	10/31/2024		Allen, Brenda						
	Amount (\$)		Payee address; City; S	State [.]	Zip Cod	le			
	\$5,000.00		1010 N Beckley Ave	state,	210 000				
	43,000.00		1010 N Deckley Ave						
			Dallas, TX 75203-1331						
	PURPOSE	(a)	Category (See Categories listed at the top of th	nis schee	dule)	(b)	Description		
	OF EXPENDITURE		Salaries/Wages/Contract Labor						de of Texas. Complete Schedule T.
									officeholder living expense
							Campaign sa	lary	y .
						1-4			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	U	ffice soug	nt			Office held
	Date		Payee name						
	11/30/2024		Allen, Brenda						
-	Amount (\$)	-	Payee address; City; S	State:	Zip Cod	le			
	\$3,000.00		1010 N Beckley Ave	stato,	2.0 000				
	40,000.00								
			Dallas, TX 75203-1331						
	PURPOSE	(a)	Category (See Categories listed at the top of th	nis schee	dule)	(b)	Description		
	OF EXPENDITURE		Salaries/Wages/Contract Labor			ļ			de of Texas. Complete Schedule T.
									officeholder living expense
							Campaign sa	lary	4
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Of	ffice soug	ht			Office held
-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment			Fees Office Overhead/Rental Expense Tra Food/Beverage Expense Polling Expense Tra / - Gift/Awards/Memorials Expense Printing Expense Tra				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 5/61 Rpt:		Johnson, Nathan M. (The Honorab	le)				00081605	
4	Date 12/31/2024		Payee name Allen, Brenda						
6	Amount (\$) \$3,000.00								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Campaign salary						, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Off	fice soug	nt		Office held	
	Date		Payee name						
	12/18/2024		Allen, Brenda						
	Amount (\$) \$1,500.00		Payee address; City; S 1010 N Beckley Ave	itate;	Zip Cod	9			
			Dallas, TX 75203-1331						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of th Salaries/Wages/Contract Labor	is schedı	ule) (ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Off	fice soug	nt		Office held	
	Date		Payee name						
	11/05/2024		American Express						
	Amount (\$) \$1,884.28		Payee address; City; S PO Box 6031	itate;	Zip Cod	e			
			Carol Stream, IL 60197-6031		i				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of th Credit Card Payment	is schedı	ule) (n, TX	ide of Texas. Complete Schedule T. , officeholder living expense nent	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Off	fice soug	nt		Office held	

	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 The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	kpense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
_	Sch: 6/61 Rpt:		Johnson, Nathan M. (The Honorable) 00081605						
4	Date 12/30/2024		Payee name American Express						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$1,390.90		PO Box 6031	·					
			Carol Stream, IL 60197-6031						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Credit Card Payment				ide of Texas. Complete Schedule T.		
							a, officeholder living expense		
					Credit card p	ayr	ment		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held		
	Date		Payee name						
	12/03/2024		American Express						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$826.97		PO Box 6031						
	φ020.31								
			Carol Stream, IL 60197-6031						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Credit Card Payment				side of Texas. Complete Schedule T.		
	-						a, officeholder living expense		
					Credit card p	ayı	ment		
	-								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held		
-	Date		Payee name						
	09/26/2024		American Express						
	Amount (\$)		-	Zip Co	de				
	\$1,347.28		PO Box 6031	210 00	uc				
	φ1,047.20								
			Carol Stream, IL 60197-6031						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	_			
	OF EXPENDITURE		Credit Card Payment				ide of Texas. Complete Schedule T.		
							a, officeholder living expense		
					Credit card p	ayr	ment		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee	Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Transportation E Travel in District Travel Out of Dis	
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·							(Ethics Commission Filers)
1	Sch: 7/61 Rpt:		on, Nathan M. (The H	Ionorable)				00081605	
4	Date 10/07/2024	Payee Annie'							
6	Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 00.00 PO Box 303277 Austin, TX 78703-0055							
8	PURPOSE OF EXPENDITURE	Contri	Dry (See Categories listed at the butions/Donations Ma date/Officeholder/Poli	ade By	,		n, TX,	ide of Texas. Com , officeholder livinç	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	C	Office soug	ht		Office he	eld
	Date	Payee	name						
	07/15/2024	Bellag	reen						
	Amount (\$) \$98.74	8041 \ Ste 81	address; City; Walnut Hill Ln .0 s, TX 75231-0956	State;	; Zip Coo	le			
	PURPOSE OF EXPENDITURE		ory (See Categories listed at th Beverage Expense	ne top of this sch	nedule)		n, TX,	ide of Texas. Com , officeholder livinç	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	C	Office soug	ht		Office he	eld
	Date	Payee	name						
	10/22/2024	Berlin	Rosen						
	Amount (\$) \$54,176.24	15 Ma Ste 16	address; City; iden Ln 600 York, NY 10038-5111	State;	; Zip Coo	le			
	PURPOSE OF EXPENDITURE		Dry (See Categories listed at th tising Expense	ne top of this sch	nedule)			ide of Texas. Com , officeholder livinç	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	C	Office soug	ht		Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 8/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605						
4	Date 10/24/2024	Payee name Berlin Rosen							
6	Amount (\$) \$54,115.70	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111							
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/21/2024	Beyond the Slogan							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$1,050.00	2710 Routh Creek Pkwy							
		Apt 4120							
		Richardson, TX 75082-0158							
	PURPOSE OF EXPENDITURE	Advertising Expense (b) Description	outside of Texas. Complete Schedule T. n, TX, officeholder living expense h party event promotion						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/06/2024	CCR Studios							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$487.13	9501 Argyle Dr							
		Austin, TX 78749-5210							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. h, TX, officeholder living expense rapher						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 9/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605						
4	Date 12/04/2024	Payee name CCR Studios							
6	Amount (\$) \$1,514.42	Payee address; City; State; Zip Code 9501 Argyle Dr Austin, TX 78749-5210							
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense liday card photography						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/19/2024	Campaignly Group LLC							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$1,000.00	4615 Jeannes Ct West Chester, OH 45069-9293							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense unications consulting						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/09/2024	Campaignly Group LLC							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$1,000.00	4615 Jeannes Ct							
		West Chester, OH 45069-9293							
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. , TX, officeholder living expense unications consulting						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			rhead/Rental Expense ense pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 10/61 Rpt:		Johnson, Nathan M. (The Honorable)				00081605
4	Date	5	Payee name				
	11/19/2024		Campaignly Group LLC				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$2,000.00		4615 Jeannes Ct				
			West Chester, OH 45069-9293				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	aluba)	(b) Description		
	OF		Consulting Expense	cuuic)	-	outs	ide of Texas. Complete Schedule T.
	EXPENDITURE		5 1				, officeholder living expense
					Digital comm	uni	ications consulting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name O	office sou	ght		Office held
	Date		Payee name				
	12/06/2024		Campaignly Group LLC				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$3,800.00		4615 Jeannes Ct				
	+0,000.00						
			West Chester, OH 45069-9293				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Consulting Expense	edule)	Check if Austin	, TX	ide of Texas. Complete Schedule T. , officeholder living expense ications consulting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name O	office sou	Jht		Office held
	Date		Payee name				
	09/07/2024		Cassandra Hernandez Campaign				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$2,500.00		PO Box 1289				
	. ,						
			Addison, TX 75001-1289				
	PURPOSE		Category (See Categories listed at the top of this sche	edule)	(b) Description	_	
	OF EXPENDITURE		Contributions/Donations Made By				ide of Texas. Complete Schedule T.
	-		Candidate/Officeholder/Political Commi	ittee	Political cont		, officeholder living expense
					r unucai cufil	ιυu	
	Complete ONUM Station	Ĺ	and data (Office the later in a second				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	int		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Inittee Legal Services The Instruction Guide explains h	Office Overhead Polling Expense Printing Expense Salaries/Wages	See Travel Out of District S/Contract Labor OTHER (enter a category not liste				
1	Total pages Schedule F1:		i	nission Filers)				
-	Sch: 11/61 Rpt:	Iohnson, Nathan M. (The Honorable)		00081605				
4	Date 07/09/2024	Payee name City of Austin						
6	Amount (\$) 7 Payee address; City; State; Zip Code \$72.72 4815 Mueller Blvd Austin, TX 78723-3573 Austin, TX 78723-3573							
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if Comparison of the compar							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Of	ffice sought	Office held				
	Date	Payee name						
	08/06/2024	City of Austin						
	Amount (\$) \$76.76	1815 Mueller Blvd	Zip Code					
	PURPOSE OF EXPENDITURE	Austin, TX 78723-3573 Category (See Categories listed at the top of this scher Office Overhead/Rental Expense	dule) (b)	Description Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense Austin apartment utilities				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Of	ffice sought	Office held				
	Date	Payee name						
	09/09/2024	City of Austin						
	Amount (\$) \$73.47	Payee address; City; State; 1815 Mueller Blvd	Zip Code					
		Austin, TX 78723-3573						
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schered Office Overhead/Rental Expense	_{dule)} (b)	Description Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense Austin apartment utilities				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Of	ffice sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide ex		Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME 3 Filer ID (Ethics Commission						
	Sch: 12/61 Rpt:		Johnson, Nathan M. (The Honora	able)				00081605	
4	Date 10/08/2024		Payee name City of Austin						
6	Amount (\$) \$71.10	7 Payee address; City; State; Zip Code 4815 Mueller Blvd Austin, TX 78723-3573							
8	PURPOSE OF EXPENDITURE	OF Office Overhead/Rental Expense						, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	С	Office soug	ht		Office held	
	Date		Payee name						
	11/08/2024		City of Austin						
	Amount (\$) \$70.22		Payee address; City; 4815 Mueller Blvd	State;	; Zip Coc	e			
	PURPOSE OF EXPENDITURE	(a)	Austin, TX 78723-3573 Category (See Categories listed at the top of Office Overhead/Rental Expense		edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense nt utilities	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held	
	Date		Payee name						
	12/10/2024		City of Austin						
	Amount (\$) \$58.47		Payee address; City; 4815 Mueller Blvd	State;	; Zip Coc	e			
			Austin, TX 78723-3573						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Office Overhead/Rental Expense		iedule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense ht utilities	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Fees Food Gift// hittee Lega	t Expense /Beverage Expense wards/Memorials Ex I Services		Office Over Polling Exp Printing Ex Salaries/W	rhead ense pense ages/	e Contract Labor		Travel in District Travel Out of Dis	quipment & Related	
_				Instruction Guid	ie explains i	now to con	npie	te this form.	-			
1	Total pages Schedule F1: Sch: 13/61 Rpt:		ILER NAME ohnson, Natha	ın M. (The Ho	norable)				3	Filer ID 00081605	(Ethics Commis	sion Filers)
4	Date	5 P	ayee name									
	07/31/2024	C	Clark, Ernest									
6	Amount (\$) \$500.00	1	Payee address; City; State; Zip Code 1259 Springbrook Dr									
			Desoto, TX 751	15-3100								
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign salary 										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeho	older name	C	Office sou	ght			Office he	eld	
	Date	Р	ayee name									
	08/30/2024	C	Clark, Ernest									
	Amount (\$)	Р	ayee address;	City;	State;	Zip Co	de					
	\$500.00		259 Springbro Desoto, TX 751									
	PURPOSE OF EXPENDITURE		Category _{(See Ca} Galaries/Wages			edule)			, TX,	de of Texas. Com officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeho	older name	C	Office sou	ght			Office he	eld	
	Date	Р	ayee name									
	09/30/2024		Clark, Ernest									
	Amount (\$) \$500.00		ayee address; 259 Springbro	City; ok Dr	State;	Zip Coo	de					
		C	Desoto, TX 751	15-3100								
	PURPOSE OF EXPENDITURE		category _{(See Ca} Salaries/Wages			edule)			, TX,	officeholder living	plete Schedule T. J expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeho	older name	C	Office soug	ght			Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	FILER	Filer ID (Ethics Commission Filers)						
	Sch: 14/61 Rpt:		on, Nathan M. (The Hor	norable)				00081605	
4	Date 10/31/2024	Payee Clark,	name Ernest						
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1259 Springbrook Dr Desoto, TX 75115-3100							
8	PURPOSE OF EXPENDITURE	DF Salaries/Wages/Contract Labor						, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	C	Office soug	ht		Office held	
	Date	Payee	name						
	11/30/2024	Clark,	Ernest						
	Amount (\$) \$500.00	-	address; City; Springbrook Dr	State;	; Zip Cod	e			
			o, TX 75115-3100						
	PURPOSE OF EXPENDITURE		Dry (See Categories listed at the tes/Wages/Contract Lab		edule)		ı, TX	ide of Texas. Complete Schedule T. K, officeholder living expense Y	
	Complete ONLY if direct expenditure to benefit C/OF	Candida	te/Officeholder name	C	Dffice soug	ht		Office held	
	Date	Payee	name						
	12/31/2024		Ernest						
	Amount (\$) \$500.00	-	address; City; Springbrook Dr	State;	Zip Cod	е			
		Desot	o, TX 75115-3100						
	PURPOSE OF EXPENDITURE		ory (See Categories listed at the tes/Wages/Contract Lab		edule)		ı, TX	ide of Texas. Complete Schedule T. K, officeholder living expense Y	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	C	Dffice soug	ht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		mittee Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense				Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2								
1	Sch: 15/61 Rpt:	I	Johnson, Nathan M. (The Honorable) 00081605							
4	Date 12/18/2024		Payee name Clark, Ernest							
6			Payee address; City;	Stata	Zip Co	10				
0	Amount (\$) \$1,000.00		1259 Springbrook Dr							
			Desoto, TX 75115-3100							
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the to Salaries/Wages/Contract Labo		edule)		travel out	tside of Texas. Com 'X, officeholder living		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office sou	jht		Office he	eld	
	Date		Payee name							
	07/24/2024		Constant Contact							
	Amount (\$)		Payee address; City;	State;	; Zip Co	de				
	\$458.38		1601 Trapelo Rd Waltham, MA 02451-7333							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the to Advertising Expense	op of this sch	edule)	Check if	travel out Austin, T	tside of Texas. Com X, officeholder living ail delivery su l	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	jht		Office he	eld	
	Date		Payee name							
	08/26/2024		Constant Contact							
	Amount (\$) \$458.38		Payee address; City; 1601 Trapelo Rd	State;	; Zip Co	le				
			Waltham, MA 02451-7333							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the to Advertising Expense	op of this sch	edule)	Check if	travel out Austin, T	tside of Texas. Com X, officeholder living ail delivery sul	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	jht		Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 16/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605						
4	Date 09/24/2024	5 Payee name Constant Contact							
6	Amount (\$) \$458.38	Payee address; City; State; Zip Code 1601 Trapelo Rd Waltham, MA 02451-7333							
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense nail delivery subscription						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	10/24/2024	Constant Contact							
	Amount (\$) \$490.36	Payee address; City; State; Zip Code 1601 Trapelo Rd Waltham, MA 02451-7333							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description	outside of Texas. Complete Schedule T. , TX, officeholder living expense nail delivery subscription						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	11/25/2024	Constant Contact							
	Amount (\$) \$490.36	Payee address; City; State; Zip Code 1601 Trapelo Rd							
		Waltham, MA 02451-7333							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense nail delivery subscription						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 17/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605						
4	Date 12/24/2024	5 Payee name Constant Contact							
6	Amount (\$) \$490.36	7 Payee address; City; State; Zip Code 36 1601 Trapelo Rd Waltham, MA 02451-7333							
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Image: Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense Campaign email delivery subscription								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	12/18/2024	Cooley, Jordan							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$500.00	460 Bastrop Hwy S							
		Apt 939 Austin, TX 78741-4332							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense S						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/21/2024	Dallas AFL-CIO							
	Amount (\$) \$350.00	Payee address; City; State; Zip Code 1408 N Washington Ave Ste 240 Dallas, TX 75204-5168							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense ent tickets						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office C Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing	epayment/Reimbursement verhead/Rental Expense Expense /Wages/Contract Labor complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	ILER NAME		3 Filer ID (Ethics Commission Filers)	
	Sch: 18/61 Rpt:	ohnson, Nathan M. (The Honorable)		00081605	
4	Date	ayee name			
	08/22/2024	Dallas County Democratic Party			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$100.00	1414 N Washington Ave			
		Dallas, TX 75204-5261			
8	PURPOSE	ategory (See Categories listed at the top of this schedule)	(b) Description		
	OF EXPENDITURE	ontributions/Donations Made By		outside of Texas. Complete Schedule T.	
	Candidate/Officeholder/Political Committee Event ticket				
		Event ücket			
9	Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
5	expenditure to benefit C/OH				
	Date	ayee name			
	10/03/2024	Dallas County Democratic Party			
⊢	Amount (\$)	\$) Payee address; City; State; Zip Code			
	\$10,000.00	1414 N Washington Ave			
	\$10,000.00				
		Dallas, TX 75204-5261			
	PURPOSE	ategory (See Categories listed at the top of this schedule)	(b) Description		
	OF EXPENDITURE	ontributions/Donations Made By		butside of Texas. Complete Schedule T.	
		andidate/Officeholder/Political Committee	JJ Dinner Spo	TX, officeholder living expense	
			JJ Diffier Spo	JISUSIIP	
⊢	Complete ONLY if direct	ndidate/Officeholder name Office so		Office held	
	expenditure to benefit C/OH				
	Date	ayee name			
	11/25/2024	allas County Democratic Party			
	Amount (\$)	xmount (\$) Payee address; City; State; Zip Code			
	\$300.00 1414 N Washington Ave				
	Dallas, TX 75204-5261				
	PURPOSE	ategory (See Categories listed at the top of this schedule)	(b) Description		
	OF EXPENDITURE	ontributions/Donations Made By		butside of Texas. Complete Schedule T.	
	Candidate/Officeholder/Political Committee Contribution			TX, officeholder living expense	
⊢	Complete ONLY if direct	ndidate/Officeholder name Office so		Office held	
	expenditure to benefit C/OI		agin		
L					

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services 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)			
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 19/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605			
4	Date	Payee name				
	09/06/2024	Dallas County Young Democrats				
6	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,500.00	13224 Marrero Dr				
		Austin, TX 78729-7464				
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description				
ľ	OF		utside of Texas. Complete Schedule T.			
	EXPENDITURE		TX, officeholder living expense			
		Contribution				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OI					
	Date	Payee name				
	09/24/2024	Dallas County Young Democrats				
-	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,500.00	13224 Marrero Dr				
	φ1,500.00	13224 Martero Di				
		Austin, TX 78729-7464				
	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE		utside of Texas. Complete Schedule T.			
			TX, officeholder living expense			
		Contribution				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
⊨	Date	Payee name				
	08/12/2024	Dallas Democratic Forum				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$250.00	2101 Ross Ave				
	\$200,000					
		Dallas, TX 75201-2703				
⊢	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF		utside of Texas. Complete Schedule T.			
	EXPENDITURE		TX, officeholder living expense			
		Political contri	ibution			
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OI	č				
\vdash						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	erhead pense (pense /ages/	e Contract Labor		Transportation E Travel in District Travel Out of Dis	
1	Total pages Schedule F1:	2	•				3	Filer ID	(Ethics Commission Filers)
-	Sch: 20/61 Rpt:	-	Johnson, Nathan M. (The Honorable)					00081605	
4	Date 09/06/2024	5	Payee name Democracy Toolbox						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
-	\$1,500.00		8552 Royal County Down Dr						
	+=,000100								
			Mckinney, TX 75070-1679						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description			
	EXPENDITURE		Advertising Expense					de of Texas. Com officeholder living	plete Schedule T.
					l	Event texting			j expense
							301		
_	Osmalata ONU V if dive at				1- 4			0.4%	-1-1
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	gnt			Office he	eid
	Date		Payee name						
	10/28/2024		Democracy Toolbox						
_	Amount (\$)		-	Zip Co	de				
	\$9,000.00		8552 Royal County Down Dr	210 00	uc				
	\$9,000.00		8552 Royal County Down Di						
			Mckinney, TX 75070-1679						
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Consulting Expense						plete Schedule T.
	EXPENDITORE							officeholder living	
						Campaign ge	ner	ral consultin	g services
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ght			Office he	eld
	expenditure to benefit C/OF	1							
	Date		Payee name						
	10/31/2024		Diaz, Alvaro						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$200.00		2405 Montopolis Dr						
			Apt 2224						
			Austin, TX 78741-6426						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(0)	Description		de of Toyloo Com	nlata Cabadula T
	EXPENDITURE		Salaries/Wages/Contract Labor					officeholder living	plete Schedule T.
						Campaign sa			j expense
						eampaign 3u		1	
	Complete ONL V if direct	Ļ	Candidate/Officeholder asmo	Office com	aht			Office he	ald
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ynt			Unice he	ะเน

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 21/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605			
4	Date	5 Payee name				
	11/30/2024	Diaz, Alvaro				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$100.00	2405 Montopolis Dr				
		Apt 2224				
		Austin, TX 78741-6426				
_	DUDDOCE					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	putside of Texas. Complete Schedule T.			
	EXPENDITURE		TX, officeholder living expense			
		Campaign sa				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	12/31/2024	Diaz, Alvaro				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$100.00					
	\$100.00	2405 Montopolis Dr				
		Apt 2224				
		Austin, TX 78741-6426				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Salaries/Wages/Contract Labor	outside of Texas. Complete Schedule T.			
			TX, officeholder living expense			
		Campaign sa	lary			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
-	Date	Payee name				
	12/18/2024	Diaz, Alvaro				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,000.00	2405 Montopolis Dr				
		Apt 2224				
		Austin, TX 78741-6426				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE		outside of Texas. Complete Schedule T.			
	EXPENDITORE		TX, officeholder living expense			
		Bonus				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OF					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex ittee Legal Services The Instruction Guid		Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2 5					2	Filer ID	(Ethics Commission Filers)
1	Sch: 22/61 Rpt:		ohnson, Nathan M. (The Hor	norable)			3	00081605	
4	Date 10/21/2024		ayee name Iower Child				-		
6	Amount (\$)		ayee address; City;	Stato	; Zip Co				
U	\$85.85		959 Royal Ln	State,	, zip cot				
		D	allas, TX 75230-3856						
8	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the t ood/Beverage Expense	op of this sch	edule)		n, TX,	de of Texas. Com officeholder living	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Dffice sou	ht		Office he	eld
	Date	Р	ayee name						
	07/02/2024	Ģ	ables Park Plaza						
	Amount (\$)	Р	ayee address; City;	State;	; Zip Coo	le			
	\$2,824.61		15 Sandra Muraida Way ustin, TX 78703-4696						
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the t office Overhead/Rental Expe		edule)	(b) Description Check if travel Check if Austir Austin apartr	n, TX,		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office soug	ht		Office he	eld
	Date	Р	ayee name						
	08/02/2024		ables Park Plaza						
	Amount (\$) \$2,840.88		ayee address; City; 15 Sandra Muraida Way	State;	; Zip Coo	le			
		А	ustin, TX 78703-4696						
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the t office Overhead/Rental Expe		iedule)	(b) Description Check if travel Check if Austin Austin apartr	n, TX,		
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Dffice soug	ht		Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	rhead/Ro ense pense ages/Co	Reimbursement ental Expense ontract Labor this form.		Travel in District Travel Out of Dist	quipment & Related Expense
1	Total pages Schedule F1:	2	· · · · ·				3	Filer ID	(Ethics Commission Filers)
1	Sch: 23/61 Rpt:		Johnson, Nathan M. (The Honorable)				3	00081605	
4	Date	5	Payee name						
	09/03/2024		Gables Park Plaza						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$2,828.69		115 Sandra Muraida Way						
			Austin, TX 78703-4696						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	adula)	(b) D	escription			
	OF EXPENDITURE		Office Overhead/Rental Expense	cuule)	Ē		outsi	de of Texas. Comp	blete Schedule T.
	EXPENDITORE				_	-		officeholder living	expense
					A	ustin apartm	nen	t rent	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ght			Office he	ld
	Date		Payee name						
	10/02/2024		Gables Park Plaza						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$2,829.65		115 Sandra Muraida Way						
			Austin, TX 78703-4696						
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) D	escription			data Oshadula T
	EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Comp officeholder living	
						ustin apartm			
	Complete ONLY if direct		Candidate/Officeholder name O	office sou	ght			Office he	ld
	expenditure to benefit C/OI	H							
	Date		Payee name						
	11/04/2024		Gables Park Plaza						
-	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$2,828.81		115 Sandra Muraida Way	•					
			,						
			Austin, TX 78703-4696	-					
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) D	escription			
	EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Comp	
						ustin apartm		officeholder living	expense
					~	usun apartir	ien	i i Giil	
	Complete ONLY if direct	Ļ	Candidate/Officeholder name O	office soug	nht			Office he	ld
	expenditure to benefit C/OI			111CE 20U(JIIL			Unice ne	iu

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens nmittee Legal Services The Instruction Guide ex		Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total names Calesdula F1.	<u> </u>		(piairis		ipiete tills loini.	1	Filer ID (Ethics Commission Filers)
1	Total pages Schedule F1: Sch: 24/61 Rpt:	2	Johnson, Nathan M. (The Honora	able)			3	Filer ID (Ethics Commission Filers) 00081605
4	Date	5	Payee name				-	
	07/02/2024		Google					
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le		
	\$53.73		1600 Amphitheatre Pkwy					
			Mountain View, CA 94043-1351					
8	PURPOSE	(a)	Category (See Categories listed at the top o	f this sch	nedule)	(b) Description		
	OF EXPENDITURE		Office Overhead/Rental Expense		,	Check if travel		ide of Texas. Complete Schedule T.
	EXPENDITORE							, officeholder living expense
						Google Work	spa	ace subscription
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Office souç	Jht		Office held
	Date		Payee name					
	08/02/2024		Google					
	Amount (\$)		Payee address; City;	State:	; Zip Coo	le		
	\$53.73		1600 Amphitheatre Pkwy	,	,			
	\$00.10							
			Mountain View, CA 94043-1351					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top o Office Overhead/Rental Expense		nedule)			ide of Texas. Complete Schedule T.
								, officeholder living expense ace subscription
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	C	Dffice soug	Jht		Office held
	Date		Payee name					
	09/03/2024		Google					
	Amount (\$)	-	Payee address; City;	State	; Zip Co	10		
	\$53.73		1600 Amphitheatre Pkwy	State,	, zip cot			
	400.70		1000 Amphilinealle Pkwy					
			Mountain View, CA 94043-1351					
	PURPOSE	(a)	Category (See Categories listed at the top o	f this sch	nedule)	(b) Description	_	
	OF EXPENDITURE		Office Overhead/Rental Expense	9		Check if Austin	I, TX	ide of Texas. Complete Schedule T. , officeholder living expense ace subscription
_								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Office soug	Jht		Office held
	,							

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)
-	Sch: 25/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605
4	Date 10/02/2024	5 Payee name Google	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
U	\$53.73	1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
8	PURPOSE		
0	OF	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense Space subscription
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/04/2024	Google	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$55.79	1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense Space Subscription
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
-	Date	Payee name	
	12/02/2024	Google	
	Amount (\$) \$56.28	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy	
		Mountain View, CA 94043-1351	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense Space subscription
ļ	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains f	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Lat	ense bor	Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2			• • • • • •		B Filer ID	(Ethics Commission Filers)
-	Sch: 26/61 Rpt:	2	Johnson, Nathan M. (The Honorable)				00081605	
4	Date 08/06/2024	5	Payee name Green Apple Lane					
6	Amount (\$)	7		Zip Co	ha			
Ŭ	\$57.00	ľ	PO Box 662	210 00				
	\$61.00							
			Kannadala TX 76060 0662					
			Kennedale, TX 76060-0662					
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	EXPENDITURE		Consulting Expense				Itside of Texas. Com	
							n consulting	expense
					e aprile	acc.g.	i concunny	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C)ffice sou	ght		Office he	eld
-	Date		Payee name					
	10/07/2024		Green Apple Lane					
				7. 0				
	Amount (\$)			Zip Co	de			
	\$130.00		PO Box 662					
			Kennedale, TX 76060-0662					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	on		
	OF EXPENDITURE		Consulting Expense				Itside of Texas. Com	
							rx, officeholder living n consulting	expense
					Graphic	uesiyi	nconsulting	
							0.45	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Ju		Office he	eiu
_	_	-						
	Date		Payee name					
	11/05/2024		Green Apple Lane					
	Amount (\$)			Zip Co	de			
	\$117.00		PO Box 662					
			Kennedale, TX 76060-0662					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	on		
	OF EXPENDITURE		Consulting Expense	,			utside of Texas. Com	
	EXPENDITORE						FX, officeholder living	expense
					Graphic	desigr	n consulting	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office he	eld
		1						

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:		B Filer ID (Ethics Commission Filers)			
-	Sch: 27/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605			
4	Date 07/12/2024	5 Payee name Gutierrez, Sarah				
6	Amount (\$) \$1,000.00	 Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765 				
8	PURPOSE OF EXPENDITURE		ntside of Texas. Complete Schedule T. IX, officeholder living expense Prations consulting			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	08/22/2024	Gutierrez, Sarah				
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 Middle Crk				
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. "X, officeholder living expense erations consulting			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	09/13/2024	Gutierrez, Sarah				
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 Middle Crk				
		Buda, TX 78610-2765				
	PURPOSE OF EXPENDITURE		ttside of Texas. Complete Schedule T. 'X, officeholder living expense rations consulting			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)			
-	Sch: 28/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605			
4	Date 10/10/2024	5 Payee name Gutierrez, Sarah				
6						
0	Amount (\$) \$1,000.00	401 Middle Crk				
		Buda, TX 78610-2765				
8	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense rations consulting			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	11/13/2024	Gutierrez, Sarah				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,000.00	401 Middle Crk Buda, TX 78610-2765				
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense rations consulting			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	12/10/2024	Gutierrez, Sarah				
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 Middle Crk				
		Buda, TX 78610-2765				
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense rations consulting			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)			
-	Sch: 29/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605			
4	Date 07/02/2024	5 Payee name Hill Country Springs				
6	Amount (\$) \$48.57	7 Payee address; City; State; Zip Code PO Box 2220 Manchaca, TX 78652-2220				
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense elivery			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	08/02/2024	Hill Country Springs				
	Amount (\$) \$113.56	Payee address; City; State; Zip Code PO Box 2220				
	DUDDOOF	Manchaca, TX 78652-2220				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense elivery			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	09/04/2024	Hill Country Springs				
	Amount (\$) \$51.57	Payee address; City; State; Zip Code PO Box 2220				
		Manchaca, TX 78652-2220				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Elivery			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)			
-	Sch: 30/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605			
4	Date 10/02/2024	5 Payee name Hill Country Springs				
6	Amount (\$) \$66.57	 Payee address; City; State; Zip Code PO Box 2220 Manchaca, TX 78652-2220 				
8	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense !livery			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	11/04/2024	Hill Country Springs				
	Amount (\$) \$48.57	Payee address; City; State; Zip Code PO Box 2220				
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	12/03/2024	Hill Country Springs				
	Amount (\$) \$48.57	Payee address; City; State; Zip Code PO Box 2220				
		Manchaca, TX 78652-2220				
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Gift/Awards/Memorials Legal Services	Fees Office Overhead/Rental Expense Transportation Equipment & Rela Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel out of District					uipment & Related Expense
-	Total names Calesdula F1.	2 5		iue explains		ipiete tills loini.	1	Filer ID	(Ethios Commission Filoro)
1	Total pages Schedule F1: Sch: 31/61 Rpt:		LER NAME hnson, Nathan M. (The H	onorable)			3	Filer ID 00081605	(Ethics Commission Filers)
4	Date	5 Pa	yee name						
	07/22/2024	Но	ootsuite						
6	Amount (\$)	7 Pa	yee address; City;	State;	; Zip Coo	le			
	\$158.83	11	1 East 5th Avenue						
		Va	ancouver BC V5T4L1 Can	ada					
8	PURPOSE	(a) Ca				(b) Description			
ľ	OF		tegory (See Categories listed at th fice Overhead/Rental Exp		iedule)		outsi	ide of Texas. Comple	ete Schedule T.
	EXPENDITURE	0		CHSC				, officeholder living e	
								anagement so	
								-	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		didate/Officeholder name	C	Dffice sou	ht		Office held	d
	Date	Pa	yee name						
	08/22/2024		ootsuite						
				Ctata	710 000	1.0			
	Amount (\$)		yee address; City;	State;	; Zip Coo	ie			
	\$158.83	11	1 East 5th Avenue						
		Va	ancouver BC V5T4L1 Can	ada					
	PURPOSE OF EXPENDITURE		tegory (See Categories listed at th fice Overhead/Rental Exp		edule)	Check if Austir	ı, TX	ide of Texas. Comple , officeholder living e anagement so	xpense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		didate/Officeholder name	C	Dffice sou	ht		Office held	d
	Date	Pa	yee name						
	09/23/2024		ootsuite						
				Stata	; Zip Co	10			
	Amount (\$)		yee address; City;	Siale,	, zip Coo	ie			
	\$158.83	LΤ	1 East 5th Avenue						
		Va	ancouver BC V5T4L1 Can	ada					
	PURPOSE	(a) Ca	tegory (See Categories listed at th	e top of this sch	iedule)	(b) Description			
	OF EXPENDITURE	Of	fice Overhead/Rental Exp	ense		Check if Austir	ı, TX	ide of Texas. Comple , officeholder living e anagement so	xpense
-	Complete ONLY if direct	Car	didate/Officeholder name	· · · · · ·	Office soug	iht		Office held	Ч
	expenditure to benefit C/Oł			Ĺ	Since Soul	p n.		Unice nel	J

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Gift/Awards/Memorials	Fees Office Overhead/Rental Expense Transportation Equipm Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District					
_	Tatal wares Oak adula E1			ince explains		ipiete this form.		Files ID (Ethics Commission	Filere)
1	Total pages Schedule F1: Sch: 32/61 Rpt:		FILER NAME Johnson, Nathan M. (The F	lonorable)			3	Filer ID (Ethics Commission 00081605	Filers)
4	Date	5	Payee name						
	10/22/2024		Hootsuite						
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	de			
	\$158.83		111 East 5th Avenue						
			Vancouver BC V5T4L1 Car	nada					
8	PURPOSE	(a)	Category (See Categories listed at the	ne ton of this sch	edule)	(b) Description			
	OF		Office Overhead/Rental Exp		icuaic)		outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		·					, officeholder living expense	
						Social media	ma	anagement software	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	ght		Office held	
	Date		Payee name						
	11/22/2024		Hootsuite						
	Amount (\$)		Payee address; City;	State	; Zip Co	de			
	\$158.83		111 East 5th Avenue		, 1				
	\$100,00								
			Vancouver BC V5T4L1 Car	nada					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Office Overhead/Rental Exp		iedule)	Check if Austir	n, TX,	ide of Texas. Complete Schedule T. K, officeholder living expense anagement software	
	Complete ONLY if direct		andidate/Officeholder name		Office sou	aht		Office held	
	expenditure to benefit C/OF		andidate/Onicenolder name	, c	JIICE SOU	JIIC		Onice neid	
	Date		Payee name						
	12/23/2024		Hootsuite						
	Amount (\$)		Payee address; City;	State	; Zip Co				
	\$158.83		111 East 5th Avenue	Olute,	, zip 00				
	\$100.00								
			Vancouver BC V5T4L1 Car	nada					
	PURPOSE	(a)	Category (See Categories listed at the	ne top of this sch	iedule)	(b) Description			
	OF EXPENDITURE		Office Overhead/Rental Exp	oense		Check if Austir	n, TX	ide of Texas. Complete Schedule T. , officeholder living expense anagement software	
_	Complete ONLV if direct	Ļ	andidato/Officeholder.sema		Office cours	abt		Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	(Office sou	Jut		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 33/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605						
4	Date 07/31/2024	Payee name Hovatter, Keely							
6	Amount (\$)	Payee address; City; State; Zip Code							
-	\$500.00	5226 Basswood Ln							
		Austin, TX 78723-5450							
8	PURPOSE	i							
ľ	OF		outside of Texas. Complete Schedule T.						
	EXPENDITURE		TX, officeholder living expense						
		Campaign sa	lary						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/30/2024	Hovatter, Keely							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$500.00	5226 Basswood Ln							
	\$500.00	SZZU BASSWOOU EIT							
		Austin, TX 78723-5450							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense Iary						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
_	Date	Payee name							
	09/30/2024	Hovatter, Keely							
		-							
	Amount (\$)								
	\$500.00	5226 Basswood Ln							
		Austin, TX 78723-5450							
	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense lary						
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held						
	expenditure to benefit C/Oł	Child Cought							

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)				
Ľ	Sch: 34/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605				
4	Date	Payee name					
•	11/12/2024	Hyatt Regency Mexico City					
6	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,829.00	Campos Eliseos Numero 204 Colonia Polanco					
		Miguel Hidalgo DF 11560 Mexico					
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description					
		· · · · · · · · · · · · · · · · · · ·	utside of Texas. Complete Schedule T.				
	EXPENDITURE		TX, officeholder living expense				
		Staff lodging f	or officeholder trip				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	08/08/2024	Inter Continental Hotel - Willard					
Amount (\$) Payee address; City; State; Zip Code							
	\$353.16 1401 Pennsylvania Ave NW						
	\$000.10						
		Washington, DC 20004-1047					
	PURPOSE OF	Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense				
			ampaign meetings				
			ampaign meetings				
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/OF						
	Date	Payee name					
	07/31/2024	Internal Revenue Service					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$197.25	PO Box 93210					
		Louisville, KY 40293					
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE		utside of Texas. Complete Schedule T.				
			TX, officeholder living expense				
		Payroll taxes					
	0 1 1 0 11 1 1						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	,						

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)					
-	Sch: 35/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605					
4	Date 08/31/2024	Payee name Internal Revenue Service						
6	Amount (\$) \$197.25	7 Payee address; City; State; Zip Code PO Box 93210 Louisville, KY 40293						
8	PURPOSE OF EXPENDITURE	OF Salaries/Wages/Contract Labor						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/30/2024							
	Amount (\$) \$197.25	\$197.25 PO Box 93210						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	10/31/2024	Internal Revenue Service						
	Amount (\$) \$558.00	Payee address;City;State; Zip CodePO Box 93210						
		Louisville, KY 40293						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)				
-	Sch: 36/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605				
4	Date	Payee name					
	11/30/2024	Internal Revenue Service					
6	Amount (\$)	Payee address; City; State; Zip Code					
	\$376.13	PO Box 93210					
		Louisville, KY 40293					
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE		el outside of Texas. Complete Schedule T.				
		Payroll taxe	in, TX, officeholder living expense				
			5				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/31/2024	Internal Revenue Service					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$355.50	PO Box 93210					
	\$000.00						
		Louisville, KY 40293					
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense S				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/18/2024	Internal Revenue Service					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$553.50	PO Box 93210					
		Louisville, KY 40293					
	PURPOSE OF	Category (See Categories listed at the top of this schedule) (b) Description	Lastrida of Taura Consulta Ochadula T				
	EXPENDITURE		I outside of Texas. Complete Schedule T. in, TX, officeholder living expense S				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel out of District Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 37/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605				
4	Date 07/31/2024	Payee name Intuit					
6	Amount (\$) \$156.70	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126					
8	PURPOSE OF EXPENDITURE	Accounting/Banking					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	09/03/2024	Intuit					
	Amount (\$) \$156.70	Payee address; City; State; Zip Code 2632 Marine Way					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. h, TX, officeholder living expense ccounting and payroll software				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	10/01/2024	Intuit					
	Amount (\$) \$156.70	Payee address;City;State;Zip Code2632 Marine Way					
		Mountain View, CA 94043-1126					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense ccounting and payroll software				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel out of District Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 38/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605				
4	Date 10/31/2024	Payee name Intuit					
6	Amount (\$) \$169.49	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126					
8	PURPOSE OF EXPENDITURE	Accounting/Banking					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/02/2024	Intuit					
	Amount (\$) \$180.15	Payee address; City; State; Zip Code 2632 Marine Way					
	PURPOSE OF EXPENDITURE	Check if Austin,	nutside of Texas. Complete Schedule T. TX, officeholder living expense Counting and payroll software				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/31/2024	Intuit					
	Amount (\$) \$186.55	Payee address; City; State; Zip Code 2632 Marine Way					
		Mountain View, CA 94043-1126					
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense counting and payroll software				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	-	Expense Office Polling Porials Expense Printin	epayment/Reimbursement Overhead/Rental Expense Expense J Expense s/Wages/Contract Labor complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	ILER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 39/61 Rpt:	ohnson, Nathan M. (T	he Honorable)		00081605			
4	Date	ayee name						
	10/30/2024	ohnson, Nathan M						
6	Amount (\$)	ayee address; City;	State; Zip	Code				
	\$181.25	825 Firefall Way	<i>,</i> ,					
		pt 2534						
		allas, TX 75230-7325						
8	PURPOSE			(b) Description				
ľ	OF	ategory (See Categories list oan Repayment/Reim			outside of Texas. Complete Schedule T.			
	EXPENDITURE	oun repuyment/reim	bulsement		n, TX, officeholder living expense			
				Schedule G	Reimbursement			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	ndidate/Officeholder nan	ne Office s	ought	Office held			
	Date	ayee name						
	07/31/2024	ohnson, Nathan M						
	Amount (\$)	ayee address; City;	State; Zip	Code				
	\$27.14 7825 Firefall Way							
		pt 2534						
		allas, TX 75230-7325						
_	PURPOSE	ategory (See Categories list	ed at the top of this schedule)	(b) Description				
	OF EXPENDITURE	ransportation Equipm			outside of Texas. Complete Schedule T.			
	EXPENDITORE	xpense			n, TX, officeholder living expense			
				Mileage reim	bursement			
	Operation ONITY is aligned		0"					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder nan	ne Office s	ougni	Office held			
	Date	ayee name						
	08/31/2024	ohnson, Nathan M						
	Amount (\$)	ayee address; City;	State; Zip	Code				
	\$48.31	825 Firefall Way	State, Zip	Code				
	φ+0.51	pt 2534						
		oallas, TX 75230-7325						
_	5055005	-						
	PURPOSE OF	ategory (See Categories list		(b) Description	outside of Texas. Complete Schedule T.			
	EXPENDITURE	ransportation Equipm Expense	ent And Related		n, TX, officeholder living expense			
				Mileage reim	bursement			
	Complete ONLY if direct	ndidate/Officeholder nan	ne Office s	ought	Office held			
	expenditure to benefit C/OI							

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			Fees Office Overhead/Rental Expense Transportation Equipment & Travel in District / - Gift/Awards/Memorials Expense Polling Expense Travel out of District					
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 40/61 Rpt:		Johnson, Nathan M. (The Honorable)					00081605
4	Date	5	Payee name					
	09/30/2024		Johnson, Nathan M					
6	Amount (\$)	7	Payee address; City; State	; Zip Co	ode			
	\$148.49		7825 Firefall Way	· •				
		I	Apt 2534					
		I	Dallas, TX 75230-7325					
8	PURPOSE	<u> </u>			(h)	Description		
ľ	OF		Category (See Categories listed at the top of this sch Transportation Equipment And Relater		(5)		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		Expense	a		Check if Austin	, тх,	officeholder living expense
						Mileage reim	bur	sement
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ıght			Office held
	Date		Payee name					
	12/17/2024		Johnson, Nathan M					
	Amount (\$)		Payee address; City; State	; Zip Co	ode			
	\$483.17 7825 Firefall Way							
			Apt 2534					
			Dallas, TX 75230-7325					
_	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description		
	OF EXPENDITURE		Transportation Equipment And Relate				outsi	de of Texas. Complete Schedule T.
	EXFENDITORE		Expense					officeholder living expense
						Mileage reim	bur	sement
			andialata (Office balalan nama					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	Office sou	ignt			Office held
_	Date	<u> </u>	Pavee name					
	12/17/2024	I	Johnson, Nathan M					
	Amount (\$)			; Zip Co	ode			
	\$70.63		7825 Firefall Way	, <u></u> p ee				
	+	I	Apt 2534					
		I	Dallas, TX 75230-7325					
_	DUDDOCE				(h)	Description		
	PURPOSE OF		Category (See Categories listed at the top of this sch Loan Repayment/Reimbursement	nedule)	(0)	Description	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		Loan Repayment/Reimbursement					officeholder living expense
						Schedule G F	Reir	mbursement
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ıght			Office held
⊢								

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related E Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel out of District Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed at							
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 41/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605						
4	Date 07/31/2024	Payee name Lappinga, Lani							
6	Amount (\$)								
U	\$500.00								
		Austin, TX 78724-3696							
8	PURPOSE OF EXPENDITURE	OF Salaries/Wages/Contract Labor							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/30/2024	Lappinga, Lani							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$500.00	7014 Asbury Dr Austin, TX 78724-3696							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. IX, officeholder living expense R TY						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/30/2024	Lappinga, Lani							
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 7014 Asbury Dr							
	\$300.00	Austin, TX 78724-3696							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. IX, officeholder living expense RTY						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	Office Overhead/Rental Expense Tr Expense Polling Expense Tr norials Expense Printing Expense Tr					sing Expense ipment & Related Expense st tegory not listed above)
1	Total pages Schedule F1:	2	· · ·				2	Filer ID (Ethics Commission Filers)
L.	Sch: 42/61 Rpt:	2	Johnson, Nathan M. (The Honorable)				3	00081605	
4	Date	5	Payee name						
	10/31/2024		Lappinga, Lani						
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode				
	\$500.00		7014 Asbury Dr						
			Austin, TX 78724-3696						
8	PURPOSE	(a)	Category (See Categories listed at the top of this so	abodulo)	(b)	Description			
-	OF		Salaries/Wages/Contract Labor	neuule)		· ·	outsi	de of Texas. Comple	te Schedule T.
	EXPENDITURE					Check if Austin	, тх,	officeholder living ex	kpense
						Campaign sa	lary	V	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held	I
	Date		Payee name						
	11/30/2024		Lappinga, Lani						
				7.0					
	Amount (\$)			e; Zip Co	bae				
	\$500.00		7014 Asbury Dr						
			Austin, TX 78724-3696						
_	PURPOSE	(a)	Category (See Categories listed at the top of this so	and ula)	(b)	Description			
	OF		Salaries/Wages/Contract Labor	neuule)			outsi	de of Texas. Comple	te Schedule T.
	EXPENDITURE					Check if Austin	, тх,	officeholder living ex	kpense
						Campaign sa	lary	V	
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ight			Office held	l
	expenditure to benefit C/OF	-							
	Date		Payee name						
	12/31/2024		Lappinga, Lani						
	Amount (\$)		Payee address; City; State	e; Zip Co	ode				
	\$500.00		7014 Asbury Dr						
			Austin, TX 78724-3696						
	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description			
	OF EXPENDITURE		Salaries/Wages/Contract Labor					de of Texas. Comple	
								officeholder living ex	kpense
						Campaign sa	uary	ý	
					Ļ				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	lght			Office held	l
	onpenditure to benefit C/OI	•							

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services 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)			
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)			
-	Sch: 43/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605			
4	Date 12/18/2024	Payee name Lappinga, Lani				
6	Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 7014 Asbury Dr Austin, TX 78724-3696 Austin, TX 78724-3696				
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	08/02/2024	Law Office of Julie Johnson				
	Amount (\$) \$800.00	Payee address;City;State;Zip Code12222 Merit DrSte 1200Dallas, TX 75251-2231				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Ce rent			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	08/30/2024	Law Office of Julie Johnson				
	Amount (\$) \$800.00	Payee address; City; State; Zip Code 12222 Merit Dr Ste 1200 Dallas, TX 75251-2231				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense C e rent			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 44/61 Rpt:		Johnson, Nathan M. (The Honorable)				00081605
4	Date	5	Payee name				
-	10/01/2024	-	Law Office of Julie Johnson				
6	Amount (\$)	7		Zip Co	de		
	\$800.00	ľ	12222 Merit Dr	, Zip C0	ue		
	\$000.00						
			Ste 1200				
			Dallas, TX 75251-2231				
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description		
	EXPENDITURE		Office Overhead/Rental Expense				de of Texas. Complete Schedule T. officeholder living expense
					Campaign off		
					eapa.g.r en		
9	Complete ONLY if direct		Candidate/Officeholder name C	Dffice sou	nht		Office held
	expenditure to benefit C/OF				5		
	Date		Payee name				
	11/01/2024		Law Office of Julie Johnson				
_	Amount (\$)	-	Payee address; City; State;	Zip Co	de		
	\$800.00		12222 Merit Dr	, <u>Lip</u> 00			
	\$000.00		Ste 1200				
			Dallas, TX 75251-2231				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description		
	EXPENDITURE		Office Overhead/Rental Expense				de of Texas. Complete Schedule T. officeholder living expense
					Campaign off		
					1 5		
	Complete ONLY if direct		Candidate/Officeholder name C	Dffice sou	ght		Office held
	expenditure to benefit C/OI	Н			-		
	Date		Payee name				
	11/29/2024		Law Office of Julie Johnson				
	Amount (\$)		Payee address; City; State;	; Zip Co	de		
	\$800.00		12222 Merit Dr	,p			
	+000100		Ste 1200				
			Dallas, TX 75251-2231				
					()		
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description	outei	de of Texas. Complete Schedule T.
	EXPENDITURE		Office Overhead/Rental Expense				officeholder living expense
					Campaign off		
	Complete ONLY if direct	(Candidate/Officeholder name C	Office sou	ght		Office held
	expenditure to benefit C/OI	Н					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	mmittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid	c P Rpense P S	Office Overhe Polling Exper Printing Expe Salaries/Wag	ense Jes/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	FILER NA	ME				3	Filer ID	(Ethics Commission Filers)
	Sch: 45/61 Rpt:	Johnson,	Nathan M. (The Ho	norable)				00081605	
4	Date 12/31/2024	Payee nam Law Offic	ne e of Julie Johnson						
6	Amount (\$)	Payee add	ress; City;	State;	Zip Code)			
	\$800.00	12222 Me	erit Dr						
		Ste 1200							
		Dallas, TX	(75251-2231						
8	PURPOSE) Category	(See Categories listed at the	ton of this schedu	ule) (k) Description			
	OF		erhead/Rental Expe				outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		·				η, TX,	officeholder living	expense
						Office rent			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/C	Officeholder name	Offi	ice sough	it		Office he	eld
	Date	Payee nam	ne						
	09/07/2024	Mihaela F	Plesa Campaign						
	Amount (\$)	Payee add	ress; City;	State;	Zip Code	9			
	\$2,500.00 PO Box 796311								
		Dallas, TX	< 75379-6311						
	PURPOSE OF		(See Categories listed at the		ule) (k	Description		da af T aura O am	
	EXPENDITURE		ons/Donations Mad e/Officeholder/Politic		00			de of Texas. Com officeholder living	
		Canulual			.ee	Political cont			oxponee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/C	Officeholder name	Offi	ice sough	it		Office he	eld
_	Date	Payee nam							
	09/06/2024		aMantia Campaign						
	Amount (\$)	Payee add		Stato:	Zip Code				
	\$5,000.00	1324 E M		State, A		;			
	\$5,000.00	1324 L IVI	auson St						
		Brownsvil	le, TX 78520-5758						
	PURPOSE OF		(See Categories listed at the		ule) (k) Description			
	EXPENDITURE		ons/Donations Mad					de of Texas. Com officeholder living	
		Candidate	e/Officeholder/Politic	car Commu	ee	Contribution	1, 1 ∧,	onicendider hving	expense
						CC.101000001			
-	Complete ONLY if direct	Candidate/C	Officeholder name	Offi	ice sough	ıt		Office he	ald
	expenditure to benefit C/OI	Canadate/C	meenoluer nume		ise sougi				
-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide exp	9	Office Over Polling Exp Printing Exp Salaries/Wa	head/ ense bense ages/(Contract Labor		Solicitation/Fundraising Expens Transportation Equipment & Re Travel in District Travel Out of District OTHER (enter a category not li	elated Expense
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID (Ethics Co	mmission Filers)
	Sch: 46/61 Rpt:		Johnson, Nathan M. (The Honora	ıble)					00081605	
4	Date 07/03/2024		Payee name NGP VAN							
6	Amount (\$) \$345.32		Payee address; City; 655 15th St NW Ste 650 Washington, DC 20005-5738	State;	Zip Coc	le				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Office Overhead/Rental Expense	this scher	dule)	[Check if Austin,	, TX,	le of Texas. Complete Schedule officeholder living expense ase subscription	э Т.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	ffice soug	ht			Office held	
	Date		Payee name							
	07/03/2024		NGP VAN							
	Amount (\$) \$159.90		Payee address; City; 655 15th St NW Ste 650 Washington, DC 20005-5738	State;	Zip Coo	le				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Office Overhead/Rental Expense	this schee	dule)	[, тх,	le of Texas. Complete Schedule officeholder living expense OSCription	: T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	ffice soug	ht			Office held	
	Date		Payee name							
	08/07/2024		NGP VAN							
	Amount (\$) \$159.90		Payee address; City; 655 15th St NW Ste 650 Washington, DC 20005-5738	State;	Zip Coc	le				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Advertising Expense	this schee	dule)	[, тх,	le of Texas. Complete Schedule officeholder living expense OSCription	эт.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	ffice soug	ht			Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	PILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 47/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605			
4	Date 08/26/2024	Payee name NGP VAN				
6	Amount (\$) \$345.32	 Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738 				
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense atabase subscription			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	09/03/2024	NGP VAN				
	Amount (\$) \$345.32	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense Atabase subscription			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	09/03/2024	NGP VAN				
	Amount (\$) \$159.90	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense t subscription			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 48/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605			
4	Date 10/03/2024	Payee name NGP VAN				
6	Amount (\$) \$159.90	7 Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738				
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense t software subscription			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/03/2024	NGP VAN				
	Amount (\$) \$345.32	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense ttabase subscription			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	11/04/2024	NGP VAN				
	Amount (\$) \$345.32	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense atabase subscription			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ommittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials B Legal Services The Instruction Gu	Expense	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Transportation E Travel in District Travel Out of Dis	
1	Total pages Schedule F1:	FILER NA	ME				3	Filer ID	(Ethics Commission Filers)
	Sch: 49/61 Rpt:		Nathan M. (The H	onorable)				00081605	
4	Date 11/04/2024	Payee nar NGP VAN							
6	Amount (\$) \$159.90	Payee add 655 15th Ste 650 Washingt			Zip Coo	le			
8	PURPOSE OF EXPENDITURE		(See Categories listed at th ng Expense	e top of this sch	edule)		ı, TX,	officeholder living	plete Schedule T. g expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/0	Officeholder name	C	Office sou	ht		Office he	eld
	Date	Payee nar	ne						
	12/03/2024	NGP VAN	J						
	Amount (\$) \$345.32	Payee add 655 15th Ste 650	St NW		Zip Coo	le			
	PURPOSE OF EXPENDITURE	Category	on, DC 20005-573 (See Categories listed at th erhead/Rental Exp	e top of this sch	edule)		n, TX,	officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/0	Officeholder name	C	Office sou	ht		Office he	eld
	Date	Payee nar	ne						
	12/18/2024	Nguyen,	Codi V						
	Amount (\$) \$1,000.00	Apt 1123	ress; City; Parmer Ln X 78729-4942	State;	Zip Coo	le			
	PURPOSE OF EXPENDITURE		(See Categories listed at th Nages/Contract La		edule)			de of Texas. Com , officeholder livinç	plete Schedule T. g expense
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/C	Officeholder name	C	Dffice sou	ht		Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)			
1	Total pages Schedule F1:	P FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 50/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605			
4	Date 07/02/2024	Payee name Paragon				
6	Amount (\$) \$25.06	 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895 				
8	PURPOSE OF EXPENDITURE	Accounting/Banking				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	08/02/2024	Paragon				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$25.06	2141 E Broadway Rd				
		Ste 202				
		Tempe, AZ 85282-1895				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense processing fee			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	09/03/2024	Paragon				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$25.06	2141 E Broadway Rd				
		Ste 202				
		Tempe, AZ 85282-1895				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense processing fee			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 51/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605			
4	Date 10/02/2024	5 Payee name Paragon				
6	Amount (\$) \$119.81	7 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895				
8	PURPOSE OF EXPENDITURE	Accounting/Banking				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	11/04/2024	Paragon				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$597.00	2141 E Broadway Rd				
		Ste 202				
		Tempe, AZ 85282-1895				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense OCESSING fEE			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	12/02/2024	Paragon				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$25.06	2141 E Broadway Rd				
		Ste 202				
		Tempe, AZ 85282-1895				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense OCESSING fEE			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)			
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 52/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605			
4	Date	Payee name				
	10/31/2024	Pirtle, Tammy				
6	Amount (\$)	Payee address; City; State; Zip Code				
	\$500.00	7122 Wood Hollow Dr				
		Apt 60				
		Austin, TX 78731-2546				
8	PURPOSE					
Ū	OF		putside of Texas. Complete Schedule T.			
	EXPENDITURE		TX, officeholder living expense			
		Campaign sa	lary			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	11/30/2024	Pirtle, Tammy				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$500.00	7122 Wood Hollow Dr				
		Apt 60				
		Austin, TX 78731-2546				
	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Salaries/Wages/Contract Labor	outside of Texas. Complete Schedule T.			
			TX, officeholder living expense			
		Campaign sa	lary			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
_	Date	Payee name				
	12/31/2024	Pirtle, Tammy				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$250.00	7122 Wood Hollow Dr				
	\$200.00	Apt 60				
		Austin, TX 78731-2546				
	PURPOSE OF	a) Category (See Categories listed at the top of this schedule) (b) Description	nuteida of Touron, Complete Color-Jule T			
	EXPENDITURE		butside of Texas. Complete Schedule T. TX, officeholder living expense			
		Campaign sa				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/Oł	Callada, Shiotholder hand Shiot Sough				

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Rep Fees Office Ov Food/Beverage Expense Polling Ex Gitf/Awards/Memorials Expense Printing Ex	ayment/Reimbursement erhead/Rental Expense pense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	FILER NAME	3	B Filer ID (Ethics Commission Filers)		
	Sch: 53/61 Rpt:	Johnson, Nathan M. (The Honorable)		00081605		
4	Date	Payee name	I			
	10/23/2024	Preston Hollow Democrats				
6	Amount (\$)	Payee address; City; State; Zip Co	ode			
	\$500.00	PO Box 670631				
		Dallas, TX 75367-0631				
8	PURPOSE	Category (See Categories listed at the top of this schedule)	(b) Description			
		Contributions/Donations Made By		tside of Texas. Complete Schedule T.		
	EXPENDITURE	Candidate/Officeholder/Political Committee		X, officeholder living expense		
			Contribution			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sou	ight	Office held		
	Date	Payee name				
	12/13/2024	Progress Texas				
	Amount (\$)	Payee address; City; State; Zip Co	ode			
	\$250.00	PO Box 132162				
		Dallas, TX 75313-2162				
	PURPOSE	Category (See Categories listed at the top of this schedule)	(b) Description			
	OF EXPENDITURE	Contributions/Donations Made By		tside of Texas. Complete Schedule T.		
		Candidate/Officeholder/Political Committee	Event sponsor	X, officeholder living expense		
				snip		
_	Complete <u>ONLY</u> if direct	andidate/Officeholder name Office sou	aht	Office held		
	expenditure to benefit C/OF		gitt			
⊨	Date	Payee name				
	10/31/2024	Rayo, Rose Marie				
-	Amount (\$)	Payee address; City; State; Zip Co	odo.			
	\$500.00	6831 Toland St	Jue			
	\$500.00					
		Nollag, TV 75227 2762				
		Dallas, TX 75227-3762	() - · · ·			
	PURPOSE OF	Category (See Categories listed at the top of this schedule)	(b) Description	tside of Texas. Complete Schedule T.		
	EXPENDITURE	Salaries/Wages/Contract Labor		X, officeholder living expense		
			Campaign sala	ary		
	Complete ONLY if direct	andidate/Officeholder name Office sou	ght	Office held		
	expenditure to benefit C/OF					

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 54/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605			
4	Date 11/30/2024	5 Payee name Rayo, Rose Marie				
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 6831 Toland St Dallas, TX 75227-3762				
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense lary			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	12/31/2024	Rayo, Rose Marie				
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 6831 Toland St Dallas, TX 75227-3762				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	outside of Texas. Complete Schedule T. TX, officeholder living expense lary			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	12/18/2024	Rayo, Rose Marie				
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 6831 Toland St				
		Dallas, TX 75227-3762				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

		EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)							
1	Sch: 55/61 Rpt:	Johnson, Nathan M. (The Honorable)	00081605							
4	Date 10/24/2024	Payee name SquareSpace								
6	Amount (\$)	Payee address; City; State; Zip Code								
J	\$294.22	225 Varick St								
		New York, NY 10014-4304								
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense bsite hosting							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/12/2024	Taberna del Alabardero								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$417.36	1776 I St NW								
		Ste 255 Washington, DC 20006-3750								
	PURPOSE OF EXPENDITURE	a) Category (See Categories listed at the top of this schedule) (b) Description Food/Beverage Expense Check if travel of	utside of Texas. Complete Schedule T. TX, officeholder living expense Colleagues							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	11/12/2024	Texas Association of Business								
	Amount (\$) \$500.00	Payee address;City;State; Zip Code316 W 12th St								
		Austin, TX 78701-1815								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense 2 e							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage E Gift/Awards/Mem Legal Services The Instructio		Office Over Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
	Total pages Schedule F1:	2						2	Filer ID	(Ethics Commission Filers)
	Sch: 56/61 Rpt:				ne Honorable)			3	00081605	
4	Date	5	Payee name							
	08/12/2024		Texas Blue	Action Dem	ocrats					
6	Amount (\$)	7	Payee addres	s; City;	State;	; Zip Cod	e			
	\$2,500.00	\$2,500.00 PO Box 41424								
			Austin, TX 7	8704-0024						
8	PURPOSE	(a)					b) Description			
ľ	OF	```	Contributior		d at the top of this sch	edule)		outs	ide of Texas. Com	plete Schedule T.
	EXPENDITURE				Political Comm	ittee	Check if Austir	n, TX	, officeholder living	expense
							Political cont	ribu	ution	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder nam	e C	Office soug	ht		Office he	eld
	Date		Payee name							
	09/09/2024		Texas Dem	ocratic Party	/					
⊢	Amount (\$)	-	Payee addres	,		Zip Cod	<u>م</u>			
	\$250.00		PO Box 157		State,	, <i>2</i> ip Cou	C			
	φ250.00		FO D0X 137	07						
			Austin, TX 7	8761-5707						
	PURPOSE	(a)	Category (Se	e Categories liste	d at the top of this sch	edule) (b) Description			
	OF EXPENDITURE		Contribution						ide of Texas. Com	
	-		Candidate/C)fficeholder/	Political Comm	littee	Event spons		, officeholder living	expense
								015	nip	
⊢	Complete ONIL V if direct		Candidate/Offi	abaldar nam		Office soug	ht.		Office he	bld
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Januluale/Olli		e C	Juice soug	in the second		Onice ne	nu -
⊨	Data									
	Date 09/09/2024		Payee name Texas Dem	ocratic Darty	,					
						Zin Cod	-			
	Amount (\$)		Payee addres	-	State;	; Zip Cod	e			
	\$250.00		PO Box 157	07						
			Austin, TX 7	8761-5707						
	PURPOSE	(a)	Category (Se	e Categories liste	d at the top of this sch	edule) (b) Description			
	OF EXPENDITURE		Contribution						ide of Texas. Com	
			Candidate/C	officeholder/	Political Comm	littee	Event spons		, officeholder living	expense
								015	μh	
⊢	Complete ONLV if direct	Ļ	Candidate/Offi	oboldor norm	0 0		ht		Office he	bld
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Januiuate/Offi	lenoiuer nam	е (Office soug	iii.		Unice he	
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Com	Event Expense Fees Food/Beverage Exp Gift/Awards/Memoria	ense als Expense	Loan Repay Office Overl Polling Expe Printing Exp Salaries/Wa	ment/Reimbursement lead/Rental Expense ense ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	ILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 57/61 Rpt:	.	Johnson, Nathan M. (The	Honorable)				00081605	
4	Date	5	Payee name				I		
	08/02/2024		Texas Senate Democratio	: Caucus					
6	Amount (\$)	7	Payee address; City;	State;	Zip Cod	e			
	\$5,000.00	I	PO Box 1042		•				
			Austin, TX 78767-1042						
8	PURPOSE					b) Description			
ľ	OF		Category (See Categories listed a	at the top of this sch	edule)		outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE	'				Check if Austir	ı, TX	, officeholder living expense	
						Caucus dues	6		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held	
	experiature to benefit C/Or								
	Date		^D ayee name						
	07/31/2024	-	Texas Workforce Commis	sion					
	Amount (\$)		Payee address; City;	State;	; Zip Cod	e			
	\$28.00 101 E 15th St								
			Austin, TX 78701-1442						
	PURPOSE	(a) (Category (See Categories listed a	at the top of this sch	edule) (b) Description			
	OF		Salaries/Wages/Contract		(cuuic)		outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		0					, officeholder living expense	
						Payroll taxes	5		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held	
	- p								
	Date		Payee name						
	08/31/2024		Texas Workforce Commis						
	Amount (\$)		Payee address; City;	State;	; Zip Cod	е			
	\$28.00	:	101 E 15th St						
			Austin, TX 78701-1442						
	PURPOSE	(a) (Category (See Categories listed a	at the top of this sch	edule) (b) Description			
	OF EXPENDITURE	:	Salaries/Wages/Contract	Labor				ide of Texas. Complete Schedule T.	
						Payroll taxes		, officeholder living expense	
-	Complete ONLY if direct		andidate/Officeholder name		Office soug	ht		Office held	
	expenditure to benefit C/OI			C	Since soug	n.			
_									

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Com Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	· .			2	Filer ID (Ethics Commission Filers)				
	Sch: 58/61 Rpt:	2	Johnson, Nathan M. (The Honorable)				00081605				
4	Date	5	Payee name								
	09/30/2024		Texas Workforce Commission								
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le						
	\$28.00		101 E 15th St								
			Austin, TX 78701-1442								
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	dulo)	(b) Description						
-	OF		Salaries/Wages/Contract Labor	uule)		outs	ide of Texas. Complete Schedule T.				
	EXPENDITURE				Check if Austir	I, TX	, officeholder living expense				
					Payroll taxes						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	ffice sou	ht		Office held				
	Date		Payee name								
	10/31/2024		Texas Workforce Commission								
_	Amount (\$)		Payee address; City; State;	Zip Co	10						
	\$47.60		101 E 15th St	Zip Co	ie						
	\$47.00		101 E 1501 50								
			Austin, TX 78701-1442								
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description						
	OF EXPENDITURE		Salaries/Wages/Contract Labor				ide of Texas. Complete Schedule T. , officeholder living expense				
					Payroll taxes		, officenoider living expense				
					F dyfoll taxes						
	Complete ONLV if direct		Candidate/Officeholder name O	ffice sour	bt		Office held				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			nice sou	lint		Once held				
_		1									
	Date		Payee name								
	11/30/2024		Texas Workforce Commission								
	Amount (\$)			Zip Co	le						
	\$37.80		101 E 15th St								
			Austin, TX 78701-1442								
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	dule)	(b) Description						
			Salaries/Wages/Contract Labor	,	Check if travel	outs	ide of Texas. Complete Schedule T.				
	EXPENDITURE		, and the second s				, officeholder living expense				
					Payroll taxes						
	Complete ONLY if direct		Candidate/Officeholder name Of	ffice sou	ht		Office held				
	expenditure to benefit C/OI	1									

			EXP	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		e Gift/Award Legal Ser	erage Expense Is/Memorials Expen		Office Over Polling Exp Printing Exp Salaries/Wa	head/ ense pense ages/0	Contract Labor		Transportation E Travel in District Travel Out of Dis			
1	Total pages Schedule F1:	2 FILE							3	Filer ID	(Ethics Commission Filers)		
	Sch: 59/61 Rpt:		nson, Nathan M	I. (The Honor	able)					00081605			
4	Date 12/31/2024		ee name as Workforce (Commission									
6	Amount (\$) \$16.80	101	Payee address; City; State; Zip Code 101 E 15th St Austin, TX 78701-1442										
8	PURPOSE OF EXPENDITURE		gory _{(See Categor} aries/Wages/Co		of this sche	dule)	I			de of Texas. Com officeholder living	nplete Schedule T. g expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		date/Officeholde	r name	Ot	ffice soug	ght			Office he	eld		
	Date	Paye	e name										
	12/18/2024	Tex	as Workforce (Commission									
	Amount (\$) \$98.00	-	ee address; E 15th St	City;	State;	Zip Coo	de						
		Aus	tin, TX 78701-2	L442									
	PURPOSE OF EXPENDITURE		gory _{(See Categol} aries/Wages/Co		of this sche	dule)	[[de of Texas. Com officeholder living	nplete Schedule T. g expense		
	Complete ONLY if direct expenditure to benefit C/OF		date/Officeholde	r name	Ot	ffice soug	ght			Office he	eld		
	Date	Paye	e name										
	07/11/2024	Unit	ed Airlines										
	Amount (\$) \$359.77		ee address; S Wacker Dr	City;	State;	Zip Coo	de						
		Chie	cago, IL 60606	-7147		i							
	PURPOSE OF EXPENDITURE		gory (See Categor vel Out of Distri		of this sche	dule)	I	Description Check if travel o Check if Austin, Staff travel fro	, TX,	officeholder living	g expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		date/Officeholde	r name	Of	ffice soug	ght			Office he	eld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
		Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee			Office Over Polling Exp Printing Exp Salaries/Wa			Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2 FIL	ER NAME	-		-	3	Filer ID	(Ethics Commission Filers)	
	Sch: 60/61 Rpt:		nson, Nathan M. (The Ho	onorable)				00081605		
4	Date 08/07/2024		ee name ted Airlines							
6	Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 50.00 233 S Wacker Dr Chicago, IL 60606-7147								
8	PURPOSE OF EXPENDITURE		egory (See Categories listed at the vel Out of District	e top of this sch	edule)		η, TX,	ide of Texas. Com , officeholder living		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		idate/Officeholder name	C	Office soug	ht		Office he	eld	
	Date	Pay	ee name							
	08/07/2024	Un	ted Airlines							
	Amount (\$) \$279.47		ee address; City; S Wacker Dr	State;	Zip Coo	le				
	PURPOSE OF EXPENDITURE	(a) Cat	cago, IL 60606-7147 egory (See Categories listed at the vel Out of District	e top of this sch	edule)	b) Description Check if travel Check if Austir Air travel for	η, TX,	, officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		idate/Officeholder name	C	Office soug	ht		Office he	eld	
	Date	Pay	ee name							
	08/07/2024	Un	ted Airlines							
	Amount (\$) \$54.70		ee address; City; 8 S Wacker Dr	State;	; Zip Coo	le				
		Ch	cago, IL 60606-7147							
	PURPOSE OF EXPENDITURE		egory (See Categories listed at the vel Out of District	e top of this sche	edule)		ι, TX,	ide of Texas. Com , officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		idate/Officeholder name	C	Office soug	ht		Office he	eld	

	Candidate/Officeholder/Politica	Accounting/Banking Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense									
			•	ins how to complete this fo	orm.						
1	Total pages Schedule F1:	2 FILER NA	ME		3	Filer ID	(Ethics Commission Filers)				
	Sch: 61/61 Rpt:	Johnson,	Nathan M. (The Honorable	e)		00081605					
4	Date	5 Payee nar	ne								
	08/16/2024		ates Postal Service								
6	Amount (\$) \$256.00	7 Payee add 8135 For Dallas T	est Ln	ate; Zip Code							
8	B PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF EXPENDITURE Office Overhead/Rental Expense (b) Description Image: Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense PO Box renewal PO Box renewal										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Officeholder name	Office sought		Office h	eld				

	EXPI	ENDITURE CATEGORII	ES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award	erage Expense F s/Memorials Expense F	Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising I Transportation Equipme Travel in District Travel Out of District OTHER (enter a categor	t & Related Expense				
	i	ruction Guide explains ho	w to complete this form.						
1 Total pages Schedule F4:					cs Commission Filers)				
Sch: 1/8 Rpt: 188/199	Johnson, Nathan M			00081605					
4 CREDIT CARD ISSUER		ncial institution n Express	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$	2,431.59				
6 PAYMENT	(a) Amount Charged \$519.59	(b) Date of Charge 11/05/2024	(c) Date(s) Credit Card Issu 12/03/2024	er Paid					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State, Zip Cod				
	Best Buy		9387 N Central Expy	- 57	,				
8 PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top Office Overhead/Ren	,	Campaign computer equ	uipment					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	. Check if Austin, T	X, officeholder living exp	ense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name Off	ice sought	Office held					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid					
	\$578.81	09/27/2024	11/05/2024						
PAYEE	(a) Payee name	1	(b) Payee address;	City,	State, Zip Cod				
	Aeromexico		Av. Tahel s/n Pensador Mexicano Venustiano Carranza						
			Ciudad de Mexico CDM	X 15620 Mexico					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Staff travel to attend conference						
Non-Political	(C) X Check if travel outside	of Texas, Complete Schedule T	. Check if Austin. T	X, officeholder living exp	ense				
Complete ONLY if direct	Candidate/Officeholder		ice sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged \$1.43	(b) Date of Charge 09/13/2024	(c) Date(s) Credit Card Issu 09/26/2024	er Paid					
PAYEE	(a) Payee name		(b) Payee address;	City,	State, Zip Cod				
	American Express		PO Box 6031						
			Carol Stream, IL 60197-6031						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Foreign transaction fee						
	Accounting/Banking								
X Political	L								
Non-Political		of Texas. Complete Schedule T		X, officeholder living exp	ense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Off	ice sought	Office held					

			U	SCHEDULE F4				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve / - Gift/Award I Committee Legal Serv	rage Expense s/Memorials Expense ices	IES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	se Transportation Equipment & Related Expense Travel in District Travel Out of District r OTHER (enter a category not listed above)				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Sch: 2/8 Rpt: 189/199	Johnson, Nathan M	I. (The Honorable)		00081605				
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZE					
ISSUER		revious	EXPENDITURES CHARGED TO A CRED CARD	\$ 2,431.59				
6 PAYMENT	(a) Amount Charged \$1.39	(b) Date of Charge 09/13/2024	(c) Date(s) Credit Card Iss 09/26/2024	uer Paid				
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code				
			PO Box 6031					
	American Express							
			Carol Stream, IL 60197	-6031				
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top	of this schedule)	Foreign transaction fee					
X Political	Accounting/Banking							
Non-Political	(C) Check if travel outside	of Toxas, Complete Schedule		rX, officeholder living expense				
			ffice sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$0.16	(b) Date of Charge 09/13/2024	(c) Date(s) Credit Card Iss 09/26/2024	uer Paid				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
			PO Box 6031					
	American Express							
			Carol Stream, IL 60197	-6031				
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Accounting/Banking	of this schedule)	Foreign transaction fee					
X Political	J							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held				
expenditure to benefit C/OH		-						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid				
	\$0.42	09/13/2024	09/26/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
			PO Box 6031					
	American Express							
			Carol Stream, IL 60197	-6031				
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE (See Categories listed at the top of this schedule)			Foreign transaction fee					
X Political	Accounting/Banking							
Non-Political	(C) Check if travel outside	T. Check if Austin.	rX, officeholder living expense					
Complete ONLY if direct	Candidate/Officeholder	•	ffice sought	Office held				
expenditure to benefit C/OH			-					

			U	SCHEDULE F4					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
Sch: 3/8 Rpt: 190/199	Johnson, Nathan M	(The Honorable)		00081605					
		ncial institution	5 TOTAL OF UNITEMIZE						
4 CREDIT CARD ISSUER		revious	EXPENDITURES CHARGED TO A CRED CARD	ES 2,431.59					
6 PAYMENT	(a) Amount Charged \$2.09	(b) Date of Charge 09/30/2024	(c) Date(s) Credit Card Iss 11/05/2024	uer Paid					
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code					
			PO Box 6031						
	American Express								
			Carol Stream, IL 60197	-6031					
8 PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top Accounting/Banking	of this schedule)	Foreign transaction fee						
X Political	Accounting/Banking								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living expense					
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged \$0.75	(b) Date of Charge 09/30/2024	(c) Date(s) Credit Card Iss 11/05/2024	uer Paid					
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code					
	Amoricon Everage		PO Box 6031						
	American Express								
			Carol Stream, IL 60197	-6031					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
	Accounting/Banking		Foreign transaction fee						
X Political									
Non-Political		of Texas. Complete Schedule		TX, officeholder living expense					
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss 11/05/2024	uer Paid					
	\$1.64	10/02/2024	11/00/2024						
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code					
=			PO Box 6031						
	American Express								
			Carol Stream, IL 60197	-6031					
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	EXPENDITURE (See Categories listed at the top of this schedule)			Foreign transaction fee					
X Political	Accounting/Banking								
Non-Political	(C) Check if travel outside	T. Check if Austin	TX, officeholder living expense						
Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	ffice sought	Office held					
expenditure to benefit C/OH			-						

EXPENDITURE	ES MADE BY C	CREDIT CARI	D	so	HEDUL	e F4		
	EXPE		ES FOR BOX 10(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Beve / - Gift/Awards I Committee Legal Serv	ense I rage Expense I s/Memorials Expense I	Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Polling Expense Travel in District Printing Expense Travel Out of District Salaries/Wages/Contract Labor OTHER (enter a category not listed above)					
1 Total pages Schedule F4:				3 Filer ID (Eth	ics Commiss	sion Filers)		
Sch: 4/8 Rpt: 191/199	Johnson, Nathan M	(The Henerable)		00081605				
· · · · · · · · · · · · · · · · · · ·								
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CREE CARD	\$	2,431.5	59		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid				
	\$1.44	10/03/2024	11/05/2024					
7 PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code		
			PO Box 6031					
	American Express							
		Carol Stream, IL 60197	-6031					
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top	of this schedule)	Foreign transaction fee					
X Political	Accounting/Banking							
Non-Political		of Tourse, Oomerslade, Ooks duile T						
9 Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T	ice sought	TX, officeholder living ex Office held	pense			
expenditure to benefit C/OH	Candidate/Oniceriolder	ice sought	Office field					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid				
	\$0.51	10/04/2024	11/05/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
			PO Box 6031					
	American Express							
			Carol Stream, IL 60197	-6031				
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top	of this schedule)	Foreign transaction fee					
X Political	Accounting/Banking							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	Check if Austin,	TX, officeholder living ex	pense			
Complete ONLY if direct	Candidate/Officeholder		ice sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid				
	\$2.57	10/04/2024	11/05/2024					
	φ2.57	10/04/2024						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	(u) r uyee name		PO Box 6031	Only,	Olule,			
	American Express		FO BOX 0051					
			Carol Stream, IL 60197	-6031				
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top	Foreign transaction fee						
X Political	Accounting/Banking							
Non-Political		of Texas. Complete Schedule T		TX, officeholder living ex	pense			
Complete ONLY if direct	Candidate/Officeholder	name Off	ice sought	Office held				
expenditure to benefit C/OH								

EXPENDITURE	ES MADE BY C)	SCHEDULE F4					
	EXPE	ENDITURE CATEGORIE	S FOR BOX 10(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Bever / - Gift/Awards I Committee Legal Servi	ense Lo O rage Expense Pe s/Memorials Expense Pi	ban Repayment/Reimbursement S ffice Overhead/Rental Expense T olling Expense T inting Expense T alaries/Wages/Contract Labor O	olicitation/Fundraising E ransportation Equipmer ravel in District ravel Out of District THER (enter a category	t & Related Expense			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commission Filers)			
Sch: 5/8 Rpt: 192/199	Johnson, Nathan M	(The Honorable)		00081605	· · · · · · · · · · · · · · · · · · ·			
•				00001003				
4 CREDIT CARD ISSUER		ncial institution Prious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 2,431.59 5 2,431.59					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid				
	\$0.59	10/04/2024	11/05/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State, Zip Code			
			PO Box 6031					
	American Express							
			Carol Stream, IL 60197-6	031				
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top	of this schedule)	Foreign transaction fee					
X Political	Accounting/Banking		· · · · g. · · · · · · · · · · · · · · ·					
		of Texas. Complete Schedule T.						
Non-Political		, officeholder living expe	ense					
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Offic	ce sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid				
	\$112.21	09/27/2024	11/05/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State, Zip Code			
			8041 Walnut Hill Ln					
	Bellagreen		Ste 810					
			Dallas, TX 75231-0956					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top		Meeting meal					
X Political	Food/Beverage Exper	nse						
Non-Political		(T						
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	ce sought	, officeholder living expe	ense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Onicerioider	name Onic	Je Sought	Onice neid				
	(a) Amount Charged	(b) Data of Charge	(a) Data(a) Cradit Card Jacua	vr Doid				
PATMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 11/05/2024	er Palu				
	\$49.97	10/24/2024	11/00/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State, Zip Code			
			8041 Walnut Hill Ln					
	Bellagreen		Ste 810					
			Dallas, TX 75231-0956					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top	Meeting meal						
X Political	Food/Beverage Exper							
		of Texas. Complete Schedule T.		, officeholder living expe	ense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought	Office held				
expenditure to benefit C/OH								

			J		SCHEDULE F4	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expr Fees Food/Beve - Gift/Award I Committee Legal Serv	rage Expense s/Memorials Expense	oan Repayment/Reimbur Office Overhead/Rental Ex Polling Expense Printing Expense Salaries/Wages/Contract L	sement Sol cpense Tra Tra Tra abor OT	licitation/Fundraising Expense Insportation Equipment & Related Expense Ivel in District wel Out of District HER (enter a category not listed above)	
1 Total pages Schodula E4:					2 Filer ID (Ethics Commission Filers)	
1 Total pages Schedule F4:		· / - · · · · · · · · · · · · · · · · · ·			3 Filer ID (Ethics Commission Filers)	
Sch: 6/8 Rpt: 193/199	Johnson, Nathan M				00081605	
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF U EXPENDITU CHARGED T CARD		\$ 2,431.59	
6 PAYMENT	(a) Amount Charged \$20.00	(b) Date of Charge 10/04/2024	(c) Date(s) Cred 11/05/2024	lit Card Issuer	Paid	
7 PAYEE	(a) Payee name		(b) Payee addre	ess;	City, State, Zip Code	
	Dallas County Dem	ocratic Party	1414 N Wash	1414 N Washington Ave		
			Dallas, TX 75204-5261			
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top of this schedule) Contributions/Donations Made By		Contribution			
X Political	Candidate/Officehold		2			
			heck if Austin, TX, o	officeholder living expense		
9 Complete <u>ONLY</u> if direct	ice sought		Office held			
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$195.97	(b) Date of Charge 12/02/2024	(c) Date(s) Crec 12/30/2024	dit Card Issuer	Paid	
PAYEE	(a) Payee name		(b) Payee addre	ess;	City, State, Zip Code	
	Flower Child		5959 Royal Ln			
	Flower Child		Dallas, TX 75	230-3856		
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top of this schedule) Food/Beverage Expense		Meal for staff			
X Political	FUUU/Deverage Expe	1150				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T		heck if Austin, TX, o	officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	name Off	ice sought		Office held	
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Crea	lit Card Issuer	Paid	
	\$95.42	10/04/2024	11/05/2024			
PAYEE	(a) Payee name		(b) Payee addre	ess;	City, State, Zip Code	
	Hyatt Regency Mexico City		Campos Eliseos Numero 204 Colonia Polanco			
			Miguel Hidalg	o DF 11560	Mexico	
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Travel meal			
X Political						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				heck if Austin, TX, o	officeholder living expense	
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Off	ice sought		Office held	
expenditure to benefit C/OH						

EXPENDITURE	ES MADE BY C	CREDIT CARI	כ	SC	HEDULE F4
	EXPE	ENDITURE CATEGORI	ES FOR BOX 10(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Beve - Gift/Awards I Committee Legal Serv	ense L rage Expense F s/Memorials Expense F	Loan Repayment/Reimbursement State Office Overhead/Rental Expense State Polling Expense State Printing Expense State Salaries/Wages/Contract Labor State	Solicitation/Fundraising E Transportation Equipmer Travel in District Travel Out of District DTHER (enter a categor	t & Related Expense
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commission Filers)
Sch: 7/8 Rpt: 194/199	Johnson, Nathan M	(The Honorable)		00081605	·····,
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZED		
ISSUER		revious	EXPENDITURES CHARGED TO A CREDI CARD	\$	2,431.59
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid	
	\$261.94	09/23/2024	09/26/2024		
7 PAYEE	(a) Payee name	•	(b) Payee address;	City,	State, Zip Code
			9440 Marsh Ln		
	Target				
			Dallas, TX 75220-4924		
8 PURPOSE OF	(a) Category		(b) Description		
EXPENDITURE	(See Categories listed at the top of this schedule)		Lamps for Capitol Office		
X Political	Office Overhead/Rent	lai Expense			
Non-Political			Check if Austin T	K, officeholder living explanation	ense
9 Complete <u>ONLY</u> if direct		Candidate/Officeholder name Office sought			
expenditure to benefit C/OH			5	Office held	
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid	
	\$124.49	10/13/2024	11/05/2024		
PAYEE	(a) Payee name		(b) Payee address;	City,	State, Zip Code
	_		9440 Marsh Ln		
Target					
			Dallas, TX 75220-4924		
PURPOSE OF	(a) Category		(b) Description		
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Office supplies		
X Political		lai Experise			
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.		. Check if Austin, T	K, officeholder living explanation	ense	
Complete ONLY if direct Candidate/Officeholder name Office sought		ice sought	Office held		
expenditure to benefit C/OH					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid	
	\$17.32	12/01/2024	12/30/2024		
PAYEE	(a) Payee name		(b) Payee address;	City,	State, Zip Code
			9440 Marsh Ln		
	Target				
			Dallas, TX 75220-4924		
PURPOSE OF	(a) Category		(b) Description		
EXPENDITURE	(See Categories listed at the top of this schedule) Office supp		Office supplies		
X Political	Office Overhead/Rent	aı Expense			
Non-Political	(C) Check if travel outside	of Taxas Complete Schedule T	Chook if Austin T	Cofficebolder living our	anca
					0100
Complete ONLY if direct expenditure to benefit C/OH		inanie Oli	ice sought		

			D		SCHEDULE F4	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve /- Gift/Award I Committee Legal Serv	erage Expense s/Memorials Expense	Loan Repayment/Reimburs Office Overhead/Rental Exp Polling Expense Printing Expense Salaries/Wages/Contract La	pense Tra Tra Tra abor OT	licitation/Fundraising Expense ansportation Equipment & Related Expense avel in District avel Out of District 'HER (enter a category not listed above)	
1 Total pages Schedule F4:		•	•		3 Filer ID (Ethics Commission Filers)	
Sch: 8/8 Rpt: 195/199	Johnson, Nathan M	1. (The Honorable)			00081605	
4 CREDIT CARD		ncial institution	5 TOTAL OF U	NITEMIZED		
ISSUER	see previous		EXPENDITUI CHARGED T CARD	RES	\$ 2,431.59	
6 PAYMENT	(a) Amount Charged \$172.36	(b) Date of Charge 12/06/2024	(c) Date(s) Cred 12/30/2024	it Card Issuer	Paid	
7 PAYEE	(a) Payee name	•	(b) Payee addre	SS;	City, State, Zip Code	
			9440 Marsh L	n		
	Target					
			Dallas, TX 75220-4924			
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top of this schedule)		Office supplies			
X Political	Office Overhead/Ren	tal Expense				
Non-Political	(c) Chock if travel outside	of Toxas, Complete Schedule		ock if Austin TX	officeholder living expense	
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. 9 Complete ONLY if direct Candidate/Officeholder name Office soug				ieck il Austill, TA, t	Office held	
expenditure to benefit C/OH			nee eeugin			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cred	it Card Issuer	Paid	
	\$779.31	11/23/2024	12/30/2024			
PAYEE	(a) Payee name	•	(b) Payee addre	SS;	City, State, Zip Code	
	Zwilling		270 Marble Ave			
	Zwilling					
			Pleasantville,	NY 10570-34	464	
PURPOSE OF		(b) Description				
EXPENDITURE	(See Categories listed at the top Gift/Awards/Memorial	Is/Memorials Expense		or staff		
X Political						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, TX, officeholder living expense		officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	name Of	fice sought		Office held	
expenditure to benefit C/OH		_				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cred	it Card Issuer	Paid	
	\$77.46	09/30/2024	11/05/2024			
PAYEE	(a) Payee name		(b) Payee addre	SS;	City, State, Zip Code	
	Hyatt Regency Mexico City		Campos Eliseos Numero 204 Colonia Polanco			
			Miguel Hidalgo	DF 11560	Mexico	
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Travel meal			
X Political	- oourbeverage Expe					
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			т. Псн	eck if Austin, TX, o	officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	name Of	fice sought		Office held	
expenditure to benefit C/OH						

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E	ayment/Reimbursement erhead/Rental Expense spense Transportation Equipment & Related E Travel in District Vages/Contract Labor OTHER (enter a category not listed at			
1	Total pages Schedule G: Sch: 1/2 Rpt: 196/199	2 FILER NAME 3 Filer ID (Ethics Commission Filer: Johnson, Nathan M. (The Honorable) 00081605				
4	Date 09/23/2024	5 Payee name AT&T				
6	Amount (\$) \$60.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 208 S Akard St Ste 2954 Dallas, TX 75202-4206				
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule (b) Description Check if Austin, TX, officeholder living expense International plan while on officeholder trip 				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
F	Date	Payee name				
	12/17/2024	AT&T				
	Amount (\$) \$70.63 Reimbursement from political contributions intended	Payee address; City; State; Zip Code 208 S Akard St Ste 2954 Dallas, TX 75202-4206				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complexity Office Overhead/Rental Expense Image: Check if Austin, TX, officeholder living end of the top of this schedule) Austin apartment utilities				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
	Date 09/11/2024	Payee name /2024 Lyby Strand				
	Amount (\$) \$55.01	Payee address; City; State; Zip Code 55.01 Lyby Strandvej 35				
	X Reimbursement from political contributions intended	Roslev Denmark				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule Food/Beverage Expense Check if Austin, TX, officeholder living expense Travel meal				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			

	POLITICAL EX	PENDITURES FROM PERSON	AL FUNDS	SCHEDULE G			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ow Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E	ayment/Reimbursement erhead/Rental Expense pense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule G: Sch: 2/2 Rpt: 197/199	2 FILER NAME Johnson, Nathan M. (The Honorable)					
4	Date 09/12/2024	5 Payee name Monarch Nyborg					
6	Amount (\$) \$10.78 Reimbursement from political contributions	7 Payee address; City; State; Zip Code Hjejlevej 107					
8	PURPOSE OF EXPENDITURE	Nyborg 5800 Denmark (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense el meal			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought	Office held			
F	Date 09/20/2024	Payee name Snooze					
	Amount (\$) \$55.46 X Reimbursement from political contributions intended	Payee address; City; State; Zip Co 8401 WALNUT HILL Ln Ste 846 Dallas, TX 75231	bde				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense h consultant			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Inst	ruction C	Guide explains	how to complete	this form.	1 Total pages Schedule T: Sch: 1/2 Rpt: 198/199		
2 FILER NAME	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Johnson, Nathan M. (The Honorable)				00081605			
4 Name of Contribut	A Name of Contributor / Corporation or Labor Organization / Pledgor /Payee						
Aeromexico							
5 Contribution / Exp	enditure rep	oorted on:					
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D Schedule F1		
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC		
6 Dates of Travel	s of Travel 7 Name of person(s) traveling						
	Lappir	nga, Lani					
	8 Depart	ure city or name of	departure location				
09/30/2024	Austin	I					
	9 Destina	ation city or name o	of destination location				
09/30/2024	Mexic	o City					
10 Means of transpor	tation	11 Purpose of trav	vel (including name of c	onference, seminar, or	r other event)		
Commercial Airp		Staff air trave	el to conference				
Name of Contribut	tor / Corpor	ation or Labor Orga	nization / Pledgor /Paye	ee			
Aeromexico							
Contribution / Exp	enditure rep	oorted on:					
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D Schedule F1		
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC		
Dates of Travel							
Dates of Haven	Lappinga, Lani						
	Departure city or name of departure location						
10/04/2024	-		departure location				
10/04/2024	10/04/2024 Mexico City						
10/04/0004	Destination city or name of destination location						
10/04/2024	Austin						
	Means of transportation Purpose of travel (including name of conference, seminar, or other event)						
Commercial Airp	Commercial Airplane Staff air travel from conference						
Name of Contribut	tor / Corpor	ation or Labor Orga	nization / Pledgor /Paye	ee			
United Airlines							
Contribution / Exp	enditure rep	ported on:					
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D X Schedule F1		
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC		
Dates of Travel	Name	of person(s) travelii					
Ducoornaver			"9 				
	Lappinga, Lani						
00/00/2024	Departure city or name of departure location						
08/08/2024 Louisville							
00/00/055	Destination city or name of destination location						
08/08/2024 Austin							
Means of transpor			vel (including name of c		r other event)		
Commercial Airp	olane	Staff travel fr	om NCSL conference	9			
1							

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee					
United Airlines					
	5 Contribution / Expenditure reported on:				
Schedule A2					
Schedule F2	Schedule F4 Schedule G Schedule H Schedule COH-UC				
6 Dates of Travel	7 Name of person(s) traveling				
	Lappinga, Lani				
	8 Departure city or name of departure location				
08/08/2024	Louisville, KY				
00,00,2021					
00/00/0004	9 Destination city or name of destination location				
08/08/2024	Washington, DC				
10 Means of transpor					
Commercial Airp	plane Staff travel from NCSL conference to DC for meetings				