

# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers) 00081605		2 Total pages filed: 199		<b>OFFICE USE ONLY</b>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Nathan M.	MI MI	Date Received <b>ELECTRONICALLY FILED</b> 02/03/2025	
	NICKNAME	LAST Johnson	SUFFIX		
4 ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)		
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit _____			
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)			
	Date Hand-delivered or Date Postmarked				
5 ORIGINAL PERIOD COVERED		Month Day Year	THROUGH	Month Day Year	Date Processed
		07/01/2024		12/31/2024	Date Imaged

6 EXPLANATION OF CORRECTION  
This report is being amended to include an in-kind contribution made in the report period.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

**Semiannual reports:** I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

**Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

The Honorable Nathan M. Johnson  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

**Remember To Attach Any Part Of The Campaign Finance Report Form  
Needed To Report And Explain Corrections**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b> (Ethics Commission Filers) 00081605	<b>2 Total pages filed:</b> 199	
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR The Honorable	FIRST Nathan M.	MI 	<b>OFFICE USE ONLY</b> <hr/> Date Received <b>ELECTRONICALLY FILED</b> 02/03/2025
	NICKNAME	LAST Johnson	SUFFIX	
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE P.O. Box 670994  Dallas, TX 75367-0994		Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
			Date Imaged	
<b>5 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR Mrs.	FIRST Sharon	MI 	
	NICKNAME	LAST Young	SUFFIX	
<b>6 CAMPAIGN TREASURER ADDRESS</b>  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 8333 Douglas Avenue Ste. 900 Dallas, TX 75225			
<b>7 CAMPAIGN TREASURER PHONE</b>	AREA CODE (214)	PHONE NUMBER 855-2942	EXTENSION	
<b>8 REPORT TYPE</b>	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
<b>9 PERIOD COVERED</b>	Month    Day    Year 07/01/2024	THROUGH		Month    Day    Year 12/31/2024
<b>10 ELECTION</b>	ELECTION DATE Month    Day    Year 11/05/2024		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
<b>11 OFFICE</b>	OFFICE HELD (if any) State Senator District 16		<b>12 OFFICE SOUGHT (if known)</b> State Senator District 16	

**GO TO PAGE 2**

# 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** (Ethics Commission Filers)  
00081605

**15 NOTICE FROM POLITICAL COMMITTEE(S)**  
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input checked="" type="checkbox"/> GENERAL	COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> SPECIFIC		Texas REALTORS PAC
	COMMITTEE ADDRESS	1115 San Jacino Blvd Ste 200 Austin, TX 78701
	COMMITTEE CAMPAIGN TREASURER NAME	Cantu, Leslie
	COMMITTEE CAMPAIGN TREASURER ADDRESS	PO Box 2246  Austin, TX 78768

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 348,722.43
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 5,078.14
	4. TOTAL POLITICAL EXPENDITURES	\$ 257,674.63
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 503,700.77
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**17 AFFIDAVIT**

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

The Honorable Nathan M. Johnson  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

4 of 199

<b>18 FILER NAME</b> Johnson, Nathan M. (The Honorable)	<b>19 Filer ID</b> (Ethics Commission Filers) 00081605
--	---

<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 345,987.50
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2,734.93
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 251,973.32
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 5,449.43
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 251.88
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/120 Rpt: 5/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/20/2024	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00040279 ) Abbott Laboratories Employee Political Action Committee <hr/> <b>6</b> Contributor address; City; State; Zip Code  Abbott Park, IL 60064-3502	<b>7</b> Amount of Contribution (\$)  \$750.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ablon, Baron <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75204-1560	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Soil Building Systems
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Abtahi, Bobby <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75203-1310	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Acosta, Arcilia <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75247-5207	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) CEO/President		Employer (See Instructions) CARCON Industries & Construction
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adamczyk, Matthew <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-1452	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/120 Rpt: 6/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aguilar, Olga	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78213-3706		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aksoy, Darlene	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Coppell, TX 75019-5311		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alist Consulting LLC	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code  Austin, TX 78757-3209		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allred, David	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Dallas, TX 75231-4830		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00040535 ) American Express PAC	Amount of Contribution (\$)  \$2,000.00
Contributor address; City; State; Zip Code  Washington, DC 20004-2673		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/120 Rpt: 7/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00066472 ) American Property Casualty Insurance Association PAC	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60631-3512		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00251876 ) Amgen Inc Political Action Committee	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Thousand Oaks, CA 91320-1730		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Apache Corporation Political Action Committee	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Houston, TX 77056-4497		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Apartment Association of Greater Dallas PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Dallas, TX 75240-6337		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Appel, Robert L.	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code  Dallas, TX 75225-4850		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/120 Rpt: 8/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Associations Inc PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75205-3348	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Atkins, James <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75252-6836	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Atmos Energy Corporation PAC <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75240-2630	Amount of Contribution (\$)  \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Avey, Melinda <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78664-9618	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Avey, Melinda <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78664-9618	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/120 Rpt: 9/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ayres, Jonathan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Manchaca, TX 78652-3037	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Babb, Daniel <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-2737	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Account Manager		Employer (See Instructions) Microsoft
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barnett, Alice <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-5562	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bartos, Janet P <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72223-4297	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beam, Alison <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78212-1556	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/120 Rpt: 10/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bedford, Dave <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75233-3304	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beef PAC <hr/> Contributor address; City; State; Zip Code  Amarillo, TX 79106-4617	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beer Alliance of Texas PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-2656	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beer Alliance of Texas PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-2656	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beeson, Karen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-8006	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/120 Rpt: 12/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Berry, Mary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75234-6234	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Flight attendant		<b>9</b> Employer (See Instructions) Delta Airlines
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Berry, Mary <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75234-6234	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Flight attendant		Employer (See Instructions) Delta Airlines
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beversdorf, Anne <hr/> Contributor address; City; State; Zip Code  Austin, TX 78750-2037	Amount of Contribution (\$)  \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: _____ ) Bing, Eric <hr/> Contributor address; City; State; Zip Code  Houston, TX 77056-1226	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) The College of Health Care Professions		Employer (See Instructions) Chancellor
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bird, Brandi <hr/> Contributor address; City; State; Zip Code  Lantana, TX 76226-1120	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Bird Advocacy & Consulting

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/120 Rpt: 13/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Black, Tre'	<b>7</b> Amount of Contribution (\$) \$2,070.25
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75208-3941	
<b>8</b> Principal occupation / Job title (See Instructions) Executive		<b>9</b> Employer (See Instructions) On-Target Supplies & Logistics
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blacksberg, Barbara	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code  Laurel, MD 20724-2023	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blake, Douglas	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76113-2031	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blocker, Lisa	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76107-3065	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bloise, Ann	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75254-8482	
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) Southwest Airlines

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/120 Rpt: 14/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 08/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bogen, Sheryl and Gordon <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75230-2243	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boland, William <hr/> Contributor address; City; State; Zip Code  Miami, FL 33133-5433	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Physiologist		Employer (See Instructions) BodyFix Method
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bresnen, Amy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-2915	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bresnen Associates
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bright, Larry <hr/> Contributor address; City; State; Zip Code  Ypsilanti, MI 48197-8985	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/27/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00035675 ) Bristol-Myers Squibb Company PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78737-4740	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/120 Rpt: 15/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brogden, William <hr/> <b>6</b> Contributor address; City; State; Zip Code  Leander, TX 78641-9396	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brookshire, Stephen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-2812	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) Atlantic Financial Managers
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brookshire, Stephen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-2812	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) Atlantic Financial Managers
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005-2355	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bryant, Judy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75231-5883	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/120 Rpt: 16/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Buchanan, Lillian <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78702-2834	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Therapist		<b>9</b> Employer (See Instructions) Lillian Buchanan
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Buck, Slader <hr/> Contributor address; City; State; Zip Code  Encinitas, CA 92023-0128	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bundick, Luz <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78680-0617	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burke, James <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5410	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Vistra Energy
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bush, Janie R <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-4960	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/120 Rpt: 17/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Butler, Daniel	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75229-5248		
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Buttery, Mary Kay	Amount of Contribution (\$)  \$2.00
Contributor address; City; State; Zip Code  Pahrump, NV 89048-6083		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Byrne, J. Tim	Amount of Contribution (\$)  \$10,000.00
Contributor address; City; State; Zip Code  Dallas, TX 75201-2027		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Lincoln Property Company
Date 10/15/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00348938</u> ) CHUBB Group Holding Inc PAC	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code  Philadelphia, PA 19106-3703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cain, Randy	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code  Austin, TX 78763-5352		
Principal occupation / Job title (See Instructions) Attorney Lobbyist		Employer (See Instructions) R.Cain Law

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/120 Rpt: 18/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cain, Sally <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75214-5604	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Educator		<b>9</b> Employer (See Instructions) Garland ISD
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carmack, Deona <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75211-2513	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carona, John <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-9806	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Associa
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Bryan <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75033-2868	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Bryan Carr
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carsrud, Alan <hr/> Contributor address; City; State; Zip Code  Spicewood, TX 78669-3038	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/120 Rpt: 19/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/24/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carsrud, Alan	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Spicewood, TX 78669-3038		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chabot, Ann	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Dallas, TX 75238-3711		
Principal occupation / Job title (See Instructions) IT PM		Employer (See Instructions) Amdocs Inc
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chambers, Thomas	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code  Dallas, TX 75207-6610		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) TerraCORE Panels
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chaney, Brent	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code  Dallas, TX 75214-3108		
Principal occupation / Job title (See Instructions) Government Affairs		Employer (See Instructions) Vistra
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chaney, Brent	Amount of Contribution (\$)  \$103.75
Contributor address; City; State; Zip Code  Dallas, TX 75214-3108		
Principal occupation / Job title (See Instructions) Government Affairs		Employer (See Instructions) Vistra

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/120 Rpt: 20/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Charles, Deanna <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75205-1225	<b>7</b> Amount of Contribution (\$)  \$103.75
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chase, Scott <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75208-2503	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chase, Scott <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75208-2503	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chevron Employees PAC <hr/> Contributor address; City; State; Zip Code  San Ramon, CA 94583-0716	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chino, Vera <hr/> Contributor address; City; State; Zip Code  Houston, TX 77055-6719	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/120 Rpt: 21/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/20/2024	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00085316 ) Cigna Group Employee PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Philadelphia, PA 19192-0003	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/27/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00008474 ) Citigroup Inc. Political Action Committee- State <hr/> Contributor address; City; State; Zip Code  Washington, DC 20004-2524	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Citzman, Manfred <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75231-5646	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Citzman, Manfred <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75231-5646	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clements, Karey <hr/> Contributor address; City; State; Zip Code  League City, TX 77573-5973	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) FH&W

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/120 Rpt: 22/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Coakley, Gerda <hr/> <b>6</b> Contributor address; City; State; Zip Code  Colleyville, TX 76034-3757	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cofrin, David <hr/> Contributor address; City; State; Zip Code  Atlanta, GA 30306-3138	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cohen, Janet <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11215-4502	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collins, Donna <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5239	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Court reporter/captioner		Employer (See Instructions) Collins Realtime Reporting P.C.
Date 07/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collins, Donna <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5239	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Court reporter/captioner		Employer (See Instructions) Collins Realtime Reporting P.C.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/120 Rpt: 23/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 08/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collins, Donna <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75229-5239	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Court reporter/captioner		<b>9</b> Employer (See Instructions) Collins Realtime Reporting P.C.
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collins, Donna <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5239	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Court reporter/captioner		Employer (See Instructions) Collins Realtime Reporting P.C.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collins, Donna <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5239	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Court reporter/captioner		Employer (See Instructions) Collins Realtime Reporting P.C.
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collins, Donna <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5239	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Court reporter/captioner		Employer (See Instructions) Collins Realtime Reporting P.C.
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collins, Donna <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5239	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Court reporter/captioner		Employer (See Instructions) Collins Realtime Reporting P.C.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/120 Rpt: 24/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collins, Donna	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75229-5239		
<b>8</b> Principal occupation / Job title (See Instructions) Court reporter/captioner		<b>9</b> Employer (See Instructions) Collins Realtime Reporting P.C.
Date 12/02/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00248716</u> ) Comcast Corporation & NBCuniversal PAC	Amount of Contribution (\$)  \$1,500.00
Contributor address; City; State; Zip Code  Philadelphia, PA 19103-2833		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Comerica Incorporated Political Action Committee	Amount of Contribution (\$)  \$3,500.00
Contributor address; City; State; Zip Code  Dallas, TX 75201-4612		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/21/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00002089</u> ) Communication Workers of America - COPE Political Contribution	Amount of Contribution (\$)  \$1,500.00
Contributor address; City; State; Zip Code  Washington, DC 20001-2760		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Conatser, Jo & Charles	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Lubbock, TX 79411-1821		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/120 Rpt: 25/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Conatser, Jo & Charles <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79411-1821	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ConocoPhillips SPIRIT PAC <hr/> Contributor address; City; State; Zip Code  Bartlesville, OK 74004-0001	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cope, Lester <hr/> Contributor address; City; State; Zip Code  Houston, TX 77074-2807	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crain, William <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-2518	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Sr. Account Manager		Employer (See Instructions) Brenntag Southwest
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cranshaw, Dorie Jean <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-3118	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 22/120 Rpt: 26/199
2 FILER NAME Johnson, Nathan M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081605
4 Date 10/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crews, Anne	7 Amount of Contribution (\$)  \$250.00
	6 Contributor address; City; State; Zip Code  Addison, TX 75001-6801	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crumpecker, Brad	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75244-7626	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Robinson Clay Inc.
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crumpecker, Brad	Amount of Contribution (\$)  \$50.00
	Contributor address; City; State; Zip Code  Dallas, TX 75244-7626	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Robinson Clay Inc.
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Curts, Rosemary	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75211-5529	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Dallas ISD
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cutshall, Hannah Davis	Amount of Contribution (\$)  \$50.00
	Contributor address; City; State; Zip Code  Dallas, TX 75219-4693	
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/120 Rpt: 27/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cutshall, Hannah Davis <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75219-4693	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Investments		<b>9</b> Employer (See Instructions) Self employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cutshall, Hannah Davis <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-4693	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self employed
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cutshall, Hannah Davis <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-4693	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self employed
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cutshall, Hannah Davis <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-4693	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cutshall, Hannah Davis <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-4693	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/120 Rpt: 28/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cutshall, Hannah Davis <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75219-4693	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Investments		<b>9</b> Employer (See Instructions) Self employed
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dahlander, Heidi <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5237	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dallas Police Officer PAC <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75215-1101	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Danielle Delgadillo Consulting <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1854	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Danley, Kathleen and Mike <hr/> Contributor address; City; State; Zip Code  La Verne, CA 91750-2373	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/120 Rpt: 29/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davis, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Bellingham, WA 98229-2347	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davis, John <hr/> Contributor address; City; State; Zip Code  Bellingham, WA 98229-2347	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) De La Cruz, Sandra <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75220-3749	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) De La Cruz, Sandra <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75220-3749	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) De La Cruz, Sandra <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75220-3749	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/120 Rpt: 30/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 08/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) De La Cruz, Sandra <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75220-3749	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) De La Cruz, Sandra <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75220-3749	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) De La Cruz, Sandra <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75220-3749	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) De La Cruz, Sandra <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75220-3749	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) De La Cruz, Sandra <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75220-3749	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/120 Rpt: 31/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) De La Cruz, Sandra <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75220-3749	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) De La Cruz, Sandra <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75220-3749	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) De La Cruz, Sandra <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75220-3749	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeWitt, John <hr/> Contributor address; City; State; Zip Code  Addison, TX 75001-6675	Amount of Contribution (\$)  \$103.75
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Coach-Net RV Motor Club
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Decker, Debra <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-2914	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/120 Rpt: 32/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dee, Michael <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75205-3921	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dennis, Nancy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-3323	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Non-Profit Executive		Employer (See Instructions) Good Reason Houston
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dickenson, Gail <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-7401	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dimijian, Mary <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75234-6568	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dion, Shannon <hr/> Contributor address; City; State; Zip Code  Carrollton, TX 75006-5209	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/120 Rpt: 33/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dobbie, Gary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75230-5106	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions) Wright Titus Agency
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dooley, Winifred <hr/> Contributor address; City; State; Zip Code  Burbank, CA 91505-4005	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Winifred Dooley
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dooley, Winifred <hr/> Contributor address; City; State; Zip Code  Burbank, CA 91505-4005	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Winifred Dooley
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dore, Stacey <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-3635	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hunt Utility Services
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Downs, Carol Lee <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-6626	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/120 Rpt: 34/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Downs, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75229-6626	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) US Oncology
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Drablos, Kelly <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75235-8234	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Drablos, Kelly <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75235-8234	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Drablos, Kelly <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75235-8234	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Drablos, Kelly <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75235-8234	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/120 Rpt: 35/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Drumm, Ann McDonald <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75204-2660	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duke, Dianne <hr/> Contributor address; City; State; Zip Code  Mesquite, TX 75149-6863	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duke, Dianne <hr/> Contributor address; City; State; Zip Code  Mesquite, TX 75149-6863	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duke, Dianne <hr/> Contributor address; City; State; Zip Code  Mesquite, TX 75149-6863	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duke, Dianne <hr/> Contributor address; City; State; Zip Code  Mesquite, TX 75149-6863	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/120 Rpt: 36/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/24/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duke, Dianne <hr/> <b>6</b> Contributor address; City; State; Zip Code  Mesquite, TX 75149-6863	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elevation Management LLC <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-6300	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00082792 ) Eli Lilly and Company Political Action Committee <hr/> Contributor address; City; State; Zip Code  Indianapolis, IN 46285-0001	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00097568 ) Employees of Raytheon Technologies Corporation PAC <hr/> Contributor address; City; State; Zip Code  Arlington, VA 22209-3914	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) English, Ryan <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75080-1817	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/120 Rpt: 37/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ennis, Carolyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75229-2715	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
<b>Date</b> 11/20/2024	<b>Full name of contributor</b> <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00363879</u> ) Entergy Employees PAC <hr/> <b>Contributor address; City; State; Zip Code</b>  Austin, TX 78701-2444	<b>Amount of Contribution (\$)</b>  \$2,000.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/02/2024	<b>Full name of contributor</b> <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00340455</u> ) Essential Utilities Inc PAC <hr/> <b>Contributor address; City; State; Zip Code</b>  Bryn Mawr, PA 19010-3402	<b>Amount of Contribution (\$)</b>  \$1,500.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/17/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Esteves, Maria <hr/> <b>Contributor address; City; State; Zip Code</b>  Irving, TX 75063-8902	<b>Amount of Contribution (\$)</b>  \$10.00
<b>Principal occupation / Job title (See Instructions)</b> Teacher		<b>Employer (See Instructions)</b> Christ the King School
<b>Date</b> 11/27/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ExxonMobil Corporation Political Action Committee of Texas <hr/> <b>Contributor address; City; State; Zip Code</b>  Irving, TX 75039-4202	<b>Amount of Contribution (\$)</b>  \$1,000.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/120 Rpt: 38/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ezell, James <hr/> <b>6</b> Contributor address; City; State; Zip Code  El Paso, TX 79911-3008	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fasken, Andy <hr/> Contributor address; City; State; Zip Code  Paris, TX 75462	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ferrell, Marjorie <hr/> Contributor address; City; State; Zip Code  Austin, TX 78745-4925	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fine, Bob <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-2830	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Baylor Scott and White Health
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fleming, Delryn <hr/> Contributor address; City; State; Zip Code  Carrollton, TX 75006-4061	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/120 Rpt: 39/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Delryn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Carrollton, TX 75006-4061	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Focused Advocacy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-2430	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foley & Lardner LLP Texas Campaign Fund <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75201-3340	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Russ <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75231-4037	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foxman, Jeana <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-4241	Amount of Contribution (\$)  \$180.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/120 Rpt: 40/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Friends of The University PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78763-0552	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Friends of UT Southwestern Medical Center <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-1330	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Friends of UT-Dallas PAC <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75240-6387	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GEICO Texas PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20076-0003	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garland, David <hr/> Contributor address; City; State; Zip Code  Minneapolis, MN 55407-2311	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/120 Rpt: 41/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 09/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaspari, Ann	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75214-3555		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gavin, Tim	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Dallas, TX 75244-6741		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/02/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00199257) Genentech Inc. Political Action Committee	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  South San Francisco, CA 94080-4918		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Karen	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Austin, TX 78703-1962		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerber, Pam	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Dallas, TX 75219-2134		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/120 Rpt: 42/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 08/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Germania Farm Mutual Political Action Committee	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>6</b> Contributor address; City; State; Zip Code  Brenham, TX 77834-0645		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gibbs, Delbert	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Dallas, TX 75238-3735		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Delbert Gibbs
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gifford, Barbara	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Silver Spring, MD 20906-5809		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gifford, Barbara	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Silver Spring, MD 20906-5809		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gifford, Barbara	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Silver Spring, MD 20906-5809		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/120 Rpt: 43/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gilmore, Nancy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75080-5114	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gilmore, Nancy <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75080-5114	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gilmore, Nancy <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75080-5114	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gist, Raymond <hr/> Contributor address; City; State; Zip Code  Grand Blanc, MI 48439-9563	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Glaser, Marnie <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-1063	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/120 Rpt: 44/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Glatz, Derek <hr/> <b>6</b> Contributor address; City; State; Zip Code  Carrollton, TX 75006-1702	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Customer Experience Analyst		<b>9</b> Employer (See Instructions) GM Financial
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Glatz, Derek <hr/> Contributor address; City; State; Zip Code  Carrollton, TX 75006-1702	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Customer Experience Analyst		Employer (See Instructions) GM Financial
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Glatz, Derek <hr/> Contributor address; City; State; Zip Code  Carrollton, TX 75006-1702	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Customer Experience Analyst		Employer (See Instructions) GM Financial
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goldfine, Steven <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-3635	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goldstein, Scott <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-1621	Amount of Contribution (\$)  \$259.00
Principal occupation / Job title (See Instructions) Communications		Employer (See Instructions) The GoldHam Group

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/120 Rpt: 45/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Sydna <hr/> <b>6</b> Contributor address; City; State; Zip Code  Garland, TX 75044-2722	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Perdue Brandon Fielder Collins & Mott
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goyne, Roderick <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-7003	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grant, Kathy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-4131	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Kathy Grant Group LLC
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Green, Rhonda <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-1673	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gross, Robert <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-5619	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Children's Eye Specialists PA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/120 Rpt: 46/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HCA Texas Good Government Fund <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701-4082	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HMWK LLC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1810	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HS Law PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1696	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hadden, Scott <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-3355	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Film producer		Employer (See Instructions) Self employed
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Halla, Marilyn <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-3958	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) volunteer		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 43/120 Rpt: 47/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harbeck, Hope E	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75243-6304		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harbeck, Hope E	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Dallas, TX 75243-6304		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Jonathan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Cambridge, MA 02139-1002		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartig, Cheryle	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Dallas, TX 75206-6317		
Principal occupation / Job title (See Instructions) Interior designer		Employer (See Instructions) Self employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hausenfluck, Amber	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Austin, TX 78704-1060		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 44/120 Rpt: 48/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Health Care Service Corporation Employees' PAC - Texas <hr/> <b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60601-5014	<b>7</b> Amount of Contribution (\$)  \$2,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Heard, Vic <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-3756	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75251-2344	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75251-2344	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75251-2344	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 45/120 Rpt: 49/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hebley, Sandi <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75251-2344	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) RN LMSW		<b>9</b> Employer (See Instructions) Faith Presbyterian Hospice
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75251-2344	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75251-2344	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Helton, Linda <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-3522	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hendrix, Michael <hr/> Contributor address; City; State; Zip Code  Irving, TX 75061-2130	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Composites Manufacturing Engineer		Employer (See Instructions) Qarbon Aerospace

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 46/120 Rpt: 50/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henley, Donald <hr/> <b>6</b> Contributor address; City; State; Zip Code  Charlottesville, VA 22903-4584	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Professional musician		<b>9</b> Employer (See Instructions) Self
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henry, LaRue H <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-2021	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henry, LaRue H <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-2021	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hensley, Jane <hr/> Contributor address; City; State; Zip Code  Taylor, TX 76574-2370	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Herman, Stewart <hr/> Contributor address; City; State; Zip Code  Minneapolis, MN 55405-3253	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 47/120 Rpt: 51/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Herndon, Floyd <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75230-1962	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hill, Keisha <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-3958	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Event Manager		Employer (See Instructions) DAPS
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hillco PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-2458	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hillis, Jeffery <hr/> Contributor address; City; State; Zip Code  Farmers Branch, TX 75234-5207	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hillis, Jeffery <hr/> Contributor address; City; State; Zip Code  Farmers Branch, TX 75234-5207	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 48/120 Rpt: 52/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 09/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hillis, Jeffery	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  Farmers Branch, TX 75234-5207		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hillis, Jeffery	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Farmers Branch, TX 75234-5207		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hodge, Nancy	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Dallas, TX 75220-3916		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hogsett, Sally	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Danville, IL 61832-1371		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holland & Knight Texas PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Dallas, TX 75201-2532		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 49/120 Rpt: 53/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 08/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holleman, Virginia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75206-5832	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hood, Arthur <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75082-3252	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Hood Global Investment Holdings
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hope, Holly <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5233	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hope, Holly <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-5233	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hopkins, Shelton <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-4212	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 50/120 Rpt: 54/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horton, Marilyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75214-3445	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Doctor		<b>9</b> Employer (See Instructions) Oak Street Health
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horton, Marilyn <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-3445	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Oak Street Health
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horton, Marilyn <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-3445	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Oak Street Health
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horton, Marilyn <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-3445	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Oak Street Health
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horton, Marilyn <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-3445	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Oak Street Health

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 52/120 Rpt: 56/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 09/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Janet	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75081-4453		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Janet	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Richardson, TX 75081-4453		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Janet	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Richardson, TX 75081-4453		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Janet	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Richardson, TX 75081-4453		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Howard, Janet	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Richardson, TX 75081-4453		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 53/120 Rpt: 57/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hughes, Christopher <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701-4050	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Husch Blackwell
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hughes, Christopher <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-4050	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Husch Blackwell
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hughes, Lannie <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75254-8006	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hughes, Lannie <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75254-8006	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/02/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00271007 ) Humana Inc. Political Action Committee <hr/> Contributor address; City; State; Zip Code  Louisville, KY 40202-2946	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 54/120 Rpt: 58/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ikemba, Catherine <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75218-4503	<b>7</b> Amount of Contribution (\$)  \$20.85
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) UT Southwestern
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ikemba, Catherine <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75218-4503	Amount of Contribution (\$)  \$20.85
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) UT Southwestern
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ikemba, Catherine <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75218-4503	Amount of Contribution (\$)  \$20.85
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) UT Southwestern
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ikemba, Catherine <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75218-4503	Amount of Contribution (\$)  \$20.85
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) UT Southwestern
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ikemba, Catherine <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75218-4503	Amount of Contribution (\$)  \$20.85
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) UT Southwestern

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 55/120 Rpt: 59/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ikemba, Catherine <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75218-4503	<b>7</b> Amount of Contribution (\$)  \$20.85
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) UT Southwestern
<b>Date</b> 12/13/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Incline P&C Group PAC <hr/> <b>Contributor address; City; State; Zip Code</b>  Austin, TX 78701-2185	<b>Amount of Contribution (\$)</b>  \$2,000.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/13/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Independent Electrical Contractors of Texas PAC <hr/> <b>Contributor address; City; State; Zip Code</b>  Austin, TX 78701-2415	<b>Amount of Contribution (\$)</b>  \$750.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/15/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Irvin, Kathleen <hr/> <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75214-2253	<b>Amount of Contribution (\$)</b>  \$1,000.00
<b>Principal occupation / Job title (See Instructions)</b> Attorney		<b>Employer (See Instructions)</b> Law Office of Kathleen Emmer Irvin
<b>Date</b> 11/27/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Irving Professional Fire Fighters PAC <hr/> <b>Contributor address; City; State; Zip Code</b>  Irving, TX 75017-1057	<b>Amount of Contribution (\$)</b>  \$1,500.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 56/120 Rpt: 60/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Isett, Carl <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79424-1390	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00128512</u> ) JP Morgan Chase & Co. PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20005-2221	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jablonski, Carol Ann <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-1317	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jagoda, Jo <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-4201	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Independent Investor		Employer (See Instructions) Jo Kurth Jagoda
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jagoda, Jo <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-4201	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Independent Investor		Employer (See Instructions) Jo Kurth Jagoda

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 58/120 Rpt: 62/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Karen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Acton, CA 93510-0093	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jordan, Anita <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-6136	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kaja, Chandra Sekhar <hr/> Contributor address; City; State; Zip Code  Irving, TX 75038-2502	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Software		Employer (See Instructions) United IT
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karp, Renee <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-5047	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Karp, Renee and David <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-5047	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 59/120 Rpt: 63/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Keffer, James	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>6</b> Contributor address; City; State; Zip Code  Eastland, TX 76448-3450		
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Keffer Konsulting LLC
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelsey, Winifred	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Houston, TX 77002-9531		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelsey, Winifred	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Houston, TX 77002-9531		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelsey, Winifred	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Houston, TX 77002-9531		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kendall, Karen	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Dallas, TX 75214-3041		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 61/120 Rpt: 65/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kull, Veda	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Rowlett, TX 75088-5104		
<b>8</b> Principal occupation / Job title (See Instructions) School Librsrian		<b>9</b> Employer (See Instructions) Dallas ISD
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lanphier, Marianne	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Richardson, TX 75080-7207		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Larcade, Margaret	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  San Antonio, TX 78212-3108		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lawson, Gayle	Amount of Contribution (\$)  \$200.00
Contributor address; City; State; Zip Code  Dallas, TX 75231-5320		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lawson, Gayle	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Dallas, TX 75231-5320		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 62/120 Rpt: 66/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lazarowicz, Katie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Brooklyn, NY 11211-1573	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
<b>Date</b> 07/02/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leavitt, Jo <hr/> <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75229-3703	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 12/13/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lee A. Woods Political Action Committee <hr/> <b>Contributor address; City; State; Zip Code</b>  Austin, TX 78701-2133	<b>Amount of Contribution (\$)</b>  \$1,000.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/14/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leighty, William <hr/> <b>Contributor address; City; State; Zip Code</b>  Juneau, AK 99802-0993	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 07/04/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Linden, Greg <hr/> <b>Contributor address; City; State; Zip Code</b>  Oakland, CA 94602-3556	<b>Amount of Contribution (\$)</b>  \$40.00
<b>Principal occupation / Job title (See Instructions)</b> Researcher		<b>Employer (See Instructions)</b> UC Berkeley

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 63/120 Rpt: 67/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Linebarger Goggan Blair & Sampson LLP <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78760-7428	<b>7</b> Amount of Contribution (\$)  \$1,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Locke Lord LLP <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002-2914	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Longbow Partners <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1827	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowenberg, Julie Goldberg <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-7809	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowenberg, Julie and Michael <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-7809	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 64/120 Rpt: 68/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowy, Martin ..... <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75230-3709	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowy, Martin ..... Contributor address; City; State; Zip Code  Dallas, TX 75230-3709	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowy, Martin ..... Contributor address; City; State; Zip Code  Dallas, TX 75230-3709	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowy, Martin ..... Contributor address; City; State; Zip Code  Dallas, TX 75230-3709	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowy, Martin ..... Contributor address; City; State; Zip Code  Dallas, TX 75230-3709	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 65/120 Rpt: 69/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowy, Martin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75230-3709	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lundblad, Christine <hr/> Contributor address; City; State; Zip Code  Lincoln, MA 01773-1114	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lundin, Charles <hr/> Contributor address; City; State; Zip Code  Garland, TX 75044-4236	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Adjunct professor		Employer (See Instructions) Collin college
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maina, William <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75240-3711	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maina, William <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75240-3711	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 66/120 Rpt: 70/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Malmberg, Kristin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75230-3145	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mann, Gerald <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-3817	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Market Development		Employer (See Instructions) Shell
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marathon Oil Company Employees PAC <hr/> Contributor address; City; State; Zip Code  Findlay, OH 45840-3229	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marshall, Denise <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-5137	Amount of Contribution (\$)  \$1,035.25
Principal occupation / Job title (See Instructions) SAHM		Employer (See Instructions) NA
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marshall, Karan <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-2809	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 67/120 Rpt: 71/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marshall, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75287-2776	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mathews, Dana <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2819	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) University of Texas Southwestern Medical Center
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mathis, Marilyn <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-2724	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mathis, Marilyn <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-2724	Amount of Contribution (\$)  \$8.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Matteson, Mark <hr/> Contributor address; City; State; Zip Code  Ashland, MA 01721-2266	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Telecom coordinator		Employer (See Instructions) Harvard University

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 68/120 Rpt: 72/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Matteson, Mark <hr/> <b>6</b> Contributor address; City; State; Zip Code  Ashland, MA 01721-2266	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Telecom coordinator		<b>9</b> Employer (See Instructions) Harvard University
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mazero, John <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-4034	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McBee, Lynn <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75204-1629	Amount of Contribution (\$)  \$259.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Young Women's Prep Network
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCabe, Michael <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-3164	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Munck Wilson Mandala
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCandless, Bruce <hr/> Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-3429	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Long Burner Parks & Delargy



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 69/120 Rpt: 73/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCants, Michael <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78731-5405	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCarroll, Shannon <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-2137	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCarroll, Shannon <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-2137	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McDonald, Susan <hr/> Contributor address; City; State; Zip Code  Washington, DC 20008-3404	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGarr, Cappy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75201-2305	Amount of Contribution (\$)  \$5,175.25
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) MCM Interests

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 70/120 Rpt: 74/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGarrahan, Andy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75248-1505	<b>7</b> Amount of Contribution (\$)  \$4.00
<b>8</b> Principal occupation / Job title (See Instructions) Psychologist		<b>9</b> Employer (See Instructions) Self employed
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-1505	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-1505	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-1505	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-1505	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 71/120 Rpt: 75/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGarrahan, Andy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75248-1505	<b>7</b> Amount of Contribution (\$)  \$4.00
<b>8</b> Principal occupation / Job title (See Instructions) Psychologist		<b>9</b> Employer (See Instructions) Self employed
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-1505	Amount of Contribution (\$)  \$4.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-1505	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed
Date 10/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-1505	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-1505	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 72/120 Rpt: 76/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/24/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy	<b>7</b> Amount of Contribution (\$) \$3.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75248-1505		
<b>8</b> Principal occupation / Job title (See Instructions) Psychologist		<b>9</b> Employer (See Instructions) Self employed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code  Dallas, TX 75248-1505		
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code  Dallas, TX 75248-1505		
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code  Dallas, TX 75248-1505		
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self employed
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuire, Michael	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code  Dallas, TX 75205-3126		
Principal occupation / Job title (See Instructions) President/CEO		Employer (See Instructions) Andrews Distributing

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 73/120 Rpt: 77/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/15/2024	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00225342 ) McGuireWoods Federal PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Richmond, VA 23219-3956	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McRoberts, Hunt <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-3501	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Independent landman		Employer (See Instructions) Self employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McRoberts, Hunt <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-3501	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Independent landman		Employer (See Instructions) Self employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McRoberts, Hunt <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-3501	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Independent landman		Employer (See Instructions) Self employed
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Menges, Patricia <hr/> Contributor address; City; State; Zip Code  River Forest, IL 60305-1740	Amount of Contribution (\$)  \$8.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 74/120 Rpt: 78/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michaely, Peter	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75229-6149		
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions) UT Southwestern Medical Center
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miertschin, Joe	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Dallas, TX 75219-8351		
Principal occupation / Job title (See Instructions) Realtor/Property Mgmt		Employer (See Instructions) Self
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Michael	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code  Dallas, TX 75248-2205		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Michael	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code  Dallas, TX 75248-2205		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller-Krause, Rose	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code  Dallas, TX 75238-3356		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 75/120 Rpt: 79/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mims, Diane <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75223-1245	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moak Casey PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-5002	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moore, Amy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-5303	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) NorthPark Presbyterian Church
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moore, Gregory <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-4132	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self employed
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morgan, Hicks <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75229-6359	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 76/120 Rpt: 80/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morgan, Karen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Augusta, MI 49012-9403	<b>7</b> Amount of Contribution (\$)  \$8.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morriss, Frances <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-4528	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mote, Robin <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-5902	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moxom, Ruth <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75206-5443	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/15/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00283135 ) National Association of Benefits and Insurance Professionals PAC <hr/> Contributor address; City; State; Zip Code  Cranford, NJ 07016-2464	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 77/120 Rpt: 81/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) National Association of Insurance and Financial Advisors Texas PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-6446	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/27/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00170258 ) National Association of Mutual Insurance Companies PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20001-6703	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) National Association of Social Workers PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-2010	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Neary, George <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-5210	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nicholson, Gary <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-5330	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 78/120 Rpt: 82/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noll, Katherine	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75238-3403		
<b>8</b> Principal occupation / Job title (See Instructions) H. R. Director		<b>9</b> Employer (See Instructions) Alcuin School
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) North Texas Automobile Dealers PAC	Amount of Contribution (\$)  \$5,000.00
Contributor address; City; State; Zip Code  Irving, TX 75062-2781		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Northrup, Michael	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Dallas, TX 75206-6815		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Cowles & Thompson P.C.
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nye, Allen	Amount of Contribution (\$)  \$15,000.00
Contributor address; City; State; Zip Code  Dallas, TX 75225-7117		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Oncor Electric Delivery Company
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Ron	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Sausalito, CA 94965-1936		
Principal occupation / Job title (See Instructions) Virtual paper pusher		Employer (See Instructions) Pacific Gas & Electric

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 79/120 Rpt: 83/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olson, Ron <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75204-1701	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olson, Ron <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75204-1701	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oncor Texas State Political Action Committee <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75202-1234	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00336735</u> ) Organon & Co Employee PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20001-1429	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ortiz, Jose <hr/> Contributor address; City; State; Zip Code  Irving, TX 75038-8819	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ortiz Law Firm

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 80/120 Rpt: 84/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 08/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ortiz, Jose <hr/> <b>6</b> Contributor address; City; State; Zip Code  Irving, TX 75038-8819	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Ortiz Law Firm
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ortiz, Jose <hr/> Contributor address; City; State; Zip Code  Irving, TX 75038-8819	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ortiz Law Firm
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ortiz, Jose <hr/> Contributor address; City; State; Zip Code  Irving, TX 75038-8819	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ortiz Law Firm
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ortiz, Jose <hr/> Contributor address; City; State; Zip Code  Irving, TX 75038-8819	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ortiz Law Firm
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Overby, Debra <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-4924	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 81/120 Rpt: 85/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PAC of Winstead PC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75201-1743	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PAC of the Independent Insurance Agents of Texas <hr/> Contributor address; City; State; Zip Code  Austin, TX 78768-4487	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PAC of the Independent Insurance Agents of Texas <hr/> Contributor address; City; State; Zip Code  Austin, TX 78768-4487	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Page, Elise <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-3619	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Senior Controller		Employer (See Instructions) CBRE Inc.
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paine, Linda <hr/> Contributor address; City; State; Zip Code  Houston, TX 77030-1203	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 82/120 Rpt: 86/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 08/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parchem, Ann	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75230-4930		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parchem, Ann	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Dallas, TX 75230-4930		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parchem, Ann	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Dallas, TX 75230-4930		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parchem, Ann	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Dallas, TX 75230-4930		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parchem, Ann	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Dallas, TX 75230-4930		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 83/120 Rpt: 87/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pardue, Leslie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78737-4487	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Johnson and Johnson Attorneys at Law
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parens, Lenore <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-2620	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/27/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00103549 ) Parsons Corporation PAC <hr/> Contributor address; City; State; Zip Code  Pasadena, CA 91124-0001	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pelc, Robert <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78633-1811	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pellizzi, Karen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-7900	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Karen Pellizzi

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 84/120 Rpt: 88/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pendery, Julia	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Lake Kiowa, TX 76240-9420		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pendery, Julia	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Lake Kiowa, TX 76240-9420		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Penn Entertainment Inc. Texas PAC	Amount of Contribution (\$)  \$2,000.00
Contributor address; City; State; Zip Code  Wyomissing, PA 19610-1247		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perales, Julie	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  Driftwood, TX 78619-8054		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Sheila	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Austin, TX 78746-5573		
Principal occupation / Job title (See Instructions) Nurse Anesthetist		Employer (See Instructions) US Anesthesia Partners



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 85/120 Rpt: 89/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pitts, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-2419	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Self employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pleasants, Chrystin <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-5315	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Clinical research monitor		Employer (See Instructions) Self employed
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pleasants, Chrystin <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-5315	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Clinical research monitor		Employer (See Instructions) Self employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pleasants, Chrystin <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-5315	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Clinical research monitor		Employer (See Instructions) Self employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Political Action Committee for Engineers <hr/> Contributor address; City; State; Zip Code  Austin, TX 78768-2145	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 86/120 Rpt: 90/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Gideon	<b>7</b> Amount of Contribution (\$) \$10,000.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75251-1800		
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) Cholla Inc.
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Punaro, Vincent	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Dallas, TX 75229-2721		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quittner, Claudia	Amount of Contribution (\$) \$36.00
Contributor address; City; State; Zip Code  Dallas, TX 75252-5832		
Principal occupation / Job title (See Instructions) Research Nurse		Employer (See Instructions) UT Southwestern Medical Center
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawlings, Mike	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Dallas, TX 75219-3965		
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) CIC Partners
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray, Linda C	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Washington, DC 20009-1889		
Principal occupation / Job title (See Instructions) Attorney Advisor		Employer (See Instructions) Federal Communications Commission

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 87/120 Rpt: 91/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ray, Linda C <hr/> <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20009-1889	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney Advisor		<b>9</b> Employer (See Instructions) Federal Communications Commission
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Red Rock Texas PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-2114	Amount of Contribution (\$)  \$4,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reid, Betheny <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-2914	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Betheny I Reid Associates
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reitbauer, Terese <hr/> Contributor address; City; State; Zip Code  Annville, PA 17003-1949	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Richards, Debbi <hr/> Contributor address; City; State; Zip Code  Garland, TX 75044-7825	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Dallas College

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 88/120 Rpt: 92/199
2 FILER NAME Johnson, Nathan M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081605
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Richards, Debbi	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code  Garland, TX 75044-7825	
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) Dallas College
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Richardson, Lisa	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  Des Plaines, IL 60016-6621	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robison, Douglass	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code  Abilene, TX 79605-4815	
Principal occupation / Job title (See Instructions) Founder and President		Employer (See Instructions) Natura Resources
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rock Holdings Inc. State PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Lansing, MI 48933-1620	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roe, Erin	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Dallas, TX 75205-1892	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Sol Endocrinology PLLC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 89/120 Rpt: 93/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rose, Deedie	<b>7</b> Amount of Contribution (\$) \$2,500.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75209-2851		
<b>8</b> Principal occupation / Job title (See Instructions) Investor		<b>9</b> Employer (See Instructions) Cardinal Investment Company Inc.
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rosenfield, Laura	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Dallas, TX 75254-7673		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Routh, Susan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Dallas, TX 75230-1722		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rural Friends of Electric Cooperatives	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code  Austin, TX 78701-2164		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan LLC PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code  Dallas, TX 75240-5050		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 90/120 Rpt: 94/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rydman, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007-7006	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Spec's
Date 11/20/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00526509</u> ) Safelite Group Inc. PAC <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43235-5086	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) 		Employer (See Instructions)
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Salyers, Jani <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2727	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Systems developer		Employer (See Instructions) ArgoData Resources
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sampson, DeMetris <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75376-3834	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sargent, Socorro Muller <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79932-3209	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 91/120 Rpt: 95/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/27/2024	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00639138 ) Sazerac Company Inc PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20002-5809	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) EMCARE
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	Amount of Contribution (\$)  \$6.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) EMCARE
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) EMCARE
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	Amount of Contribution (\$)  \$6.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) EMCARE
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) EMCARE

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 92/120 Rpt: 96/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 09/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	<b>7</b> Amount of Contribution (\$)  \$6.00
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) EMCARE
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) EMCARE
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	Amount of Contribution (\$)  \$6.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) EMCARE
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) EMCARE
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seldin, Ellen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-2437	Amount of Contribution (\$)  \$6.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) EMCARE



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 93/120 Rpt: 97/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 09/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sell, Alisa <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75205-3416	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sepulveda, Esmeralda <hr/> Contributor address; City; State; Zip Code  Grand Prairie, TX 75052-8391	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UTSW Medical Center
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shapiro, Gabriel <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-1856	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shea, Sally <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75081-4424	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shea, Sally <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75081-4424	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 94/120 Rpt: 98/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 09/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shea, Sally	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75081-4424		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shea, Sally	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Richardson, TX 75081-4424		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shivers, Melody	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Dallas, TX 75243-8087		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Siler, Grace	Amount of Contribution (\$)  \$7.00
Contributor address; City; State; Zip Code  Henderson, TX 75654		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Siler, Grace	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Henderson, TX 75654		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 95/120 Rpt: 99/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Silverstein, Alison <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78723-4905	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Self employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skruch, Brian <hr/> Contributor address; City; State; Zip Code  Farmers Branch, TX 75234-4801	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Sales Engineer		Employer (See Instructions) Samsara
Date 10/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Robert <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-1955	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) President and CEO		Employer (See Instructions) Accident and Injury Clinic
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, William <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008-3914	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith-Connell, Kathryn <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60626-6943	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 96/120 Rpt: 100/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Snider, Tim <hr/> <b>6</b> Contributor address; City; State; Zip Code  Port Townsend, WA 98368-6019	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Snyder, Michael <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75234-6442	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Freddie Mac
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Snyder, Michael <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75234-6442	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Freddie Mac
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Southern Glazers PAC of Texas <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1696	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Southwestern Committee on Political Education <hr/> Contributor address; City; State; Zip Code  Amarillo, TX 79101-2510	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 97/120 Rpt: 101/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Souza, Randy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Saratoga, CA 95070-5751	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stahl, Linda <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-2913	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Carter Arnett Bennett & Perez PLLC
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Steinhart, Ronald <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-3055	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sterling, Karen <hr/> Contributor address; City; State; Zip Code  Cedar Creek, TX 78612-3593	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sterling, Karen <hr/> Contributor address; City; State; Zip Code  Cedar Creek, TX 78612-3593	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 98/120 Rpt: 102/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swift, Galvin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75209-2822	<b>7</b> Amount of Contribution (\$)  \$10.53
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swift, Galvin <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-2822	Amount of Contribution (\$)  \$10.53
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swift, Galvin <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-2822	Amount of Contribution (\$)  \$10.53
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swift, Galvin <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-2822	Amount of Contribution (\$)  \$10.53
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swift, Galvin <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75209-2822	Amount of Contribution (\$)  \$10.53
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 99/120 Rpt: 103/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 08/21/2024	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00589663 ) Sysco Corp Good Government Committee Inc.	<b>7</b> Amount of Contribution (\$) \$1,500.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77077-2025	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tarpley, Gloria M	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Dallas, TX 75218-4330	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tasian, Diane	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  Dallas, TX 75219-4414	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, John	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Dallas, TX 75238-4129	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Alliance
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, John	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Dallas, TX 75238-4129	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Alliance

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 100/120 Rpt: 104/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75238-4129	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Sales		<b>9</b> Employer (See Instructions) Alliance
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Tom <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-6506	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Tom D <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-6506	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Tom D <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-6506	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Tom D <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-6506	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 101/120 Rpt: 105/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tenaska Employees Texas PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Omaha, NE 68154-5212	<b>7</b> Amount of Contribution (\$)  \$2,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texans for Lawsuit Reform PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-2175	Amount of Contribution (\$)  \$20,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Academy of Physician Assistants PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78737-4707	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Aggregates & Concrete Assn.-Political Action Committee <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78680-0459	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Apartment Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1951	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 102/120 Rpt: 106/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Assisted Living Association PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78759-8423	<b>7</b> Amount of Contribution (\$)  \$2,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Assn. Of Pawnbrokers PAC <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75034-3084	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Association for Interior Design PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77263-0867	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Association of Staffing PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1634	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Bankers Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-2321	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 103/120 Rpt: 107/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Beverage Alliance <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701-2165	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Capital Bank PAC <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75201-1985	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas College of Emergency Physicians <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1665	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Cornerstone Credit Union League PAC <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75265-5147	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Dairymen PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78711-3182	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 104/120 Rpt: 108/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Dental Association PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704-3644	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Homecare & Hospice PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-1633	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Instruments Incorporated PAC <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-0592	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Land & Title Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-4775	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Leads PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78767-0279	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 105/120 Rpt: 109/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas McDonald's Operators Association PAC Inc. <hr/> <b>6</b> Contributor address; City; State; Zip Code  Athens, TX 75751-2143	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Medical Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1624	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Mortgage Bankers PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-2668	Amount of Contribution (\$)  \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Oil and Gas Association Good Government Committee <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1823	Amount of Contribution (\$)  \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Optometric PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78705-2004	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 106/120 Rpt: 110/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Orthopaedic Political Action Committee	<b>7</b> Amount of Contribution (\$) \$1,500.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701-1665		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Pharmacy Association PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 78757-8034		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Radiological Society PAC	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code  San Antonio, TX 78257-1160		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas SANDS PAC	Amount of Contribution (\$) \$4,500.00
Contributor address; City; State; Zip Code  Austin, TX 78701-4093		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas State Association Of Fire Fighters PAC	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code  Austin, TX 78701-2170		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 107/120 Rpt: 111/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas State University System PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701-2434	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Statewide Telephone Cooperative Inc PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1865	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Towing And Storage Assn. PAC <hr/> Contributor address; City; State; Zip Code  Spring, TX 77386-1024	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Trial Lawyers Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1814	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Trial Lawyers Association PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-1814	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 108/120 Rpt: 112/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Wildlife Association PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  New Braunfels, TX 78132-3478	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00123612</u> ) Textron Inc. Political Action Committee <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76101-0482	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Donna <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248-3120	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Kelvin <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-2012	Amount of Contribution (\$)  \$190.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Shellie <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238-2533	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Ruhter & Reynolds Inc.



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 109/120 Rpt: 113/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Todd, Anne <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75230-3119	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00542365</u> ) Toyota Motor North America PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20004-2801	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tuthill, David <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230-1929	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00571141</u> ) UCB Inc. PAC <hr/> Contributor address; City; State; Zip Code  Sausalito, CA 94965-3321	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00339655</u> ) US Oncology Inc. Good Government Committee <hr/> Contributor address; City; State; Zip Code  The Woodlands, TX 77380-1975	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 110/120 Rpt: 114/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) USAA Employee Political Action Fund <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701-2132	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Union Pacific Corp. Fund For Effective Government <hr/> Contributor address; City; State; Zip Code  Washington, DC 20005-6621	Amount of Contribution (\$)  \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00274431 ) UnitedHealth Group PAC <hr/> Contributor address; City; State; Zip Code  Hopkins, MN 55343-9664	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Valero Energy Corporation PAC <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78269-6000	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vallot, Colette <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-7905	Amount of Contribution (\$)  \$750.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 111/120 Rpt: 115/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Blargan, Joseph <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75209-7306	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vestal, Howard <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-2046	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vestal, Howard <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205-2046	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Villarreal, Beverly <hr/> Contributor address; City; State; Zip Code  Austin, TX 78737-1343	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Villarreal, Massey <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77479-6716	Amount of Contribution (\$)  \$2,587.75
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Precision Task Group

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 112/120 Rpt: 116/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 08/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vistra Employee Political Action Committee of Vistra Corp. <hr/> <b>6</b> Contributor address; City; State; Zip Code  Irving, TX 75039-2479	<b>7</b> Amount of Contribution (\$)  \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vogel, Garrett <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75240-1123	Amount of Contribution (\$)  \$350.00
Principal occupation / Job title (See Instructions) Corporate financial consulting		Employer (See Instructions) Self employed
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vonnahme, Mark <hr/> Contributor address; City; State; Zip Code  Irving, TX 75062-7513	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wade, Elise <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-2122	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wade, Elise <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-2122	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 113/120 Rpt: 117/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 09/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wade, Elise <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75214-2122	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wade, Elise <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-2122	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wade, Elise <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75214-2122	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00160770</u> ) Walgreen Co PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20005-4764	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walter, Christopher <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-6153	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) ALJ		Employer (See Instructions) TWC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 115/120 Rpt: 119/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weekley, Richard <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77027-9137	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Chairman		<b>9</b> Employer (See Instructions) Weekley Development
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weller, Elizabeth <hr/> Contributor address; City; State; Zip Code  Carrollton, TX 75006-2669	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) LGBS
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) West, Jay <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219-4052	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Comm Real Estate		Employer (See Instructions) Self employed
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wheaton, Peggy <hr/> Contributor address; City; State; Zip Code  Highland Village, TX 75077-7237	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wholesale Beer Distributors of Texas <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701-2434	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 116/120 Rpt: 120/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilder, Laura <hr/> <b>6</b> Contributor address; City; State; Zip Code  Garland, TX 75043-3431	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilder, Laura <hr/> Contributor address; City; State; Zip Code  Garland, TX 75043-3431	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williamson, Ellen <hr/> Contributor address; City; State; Zip Code  Irving, TX 75039-3234	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williamson, Ellen <hr/> Contributor address; City; State; Zip Code  Irving, TX 75039-3234	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williamson, Ellen <hr/> Contributor address; City; State; Zip Code  Irving, TX 75039-3234	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 117/120 Rpt: 121/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williamson, Ellen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Irving, TX 75039-3234	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self Employed
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williamson, Ellen <hr/> Contributor address; City; State; Zip Code  Irving, TX 75039-3234	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolf, Whitney <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-6308	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolf, Whitney <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-6308	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolf, Whitney <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-6308	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 118/120 Rpt: 122/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolf, Whitney <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75243-6308	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolf, Whitney <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75243-6308	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Joe Nathan <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75081-5550	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) JN Wright & Associates PC
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Joe Nathan <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75081-5550	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) JN Wright & Associates PC
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wrinkle, William <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75080-6933	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Spacee

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 119/120 Rpt: 123/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yaeger, Suzanne	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75244-7738		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Young, Sharon	Amount of Contribution (\$)  \$2,500.00
Contributor address; City; State; Zip Code  Dallas, TX 75220-2024		
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Quadrant Capital Partners
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zahaluk, Karen	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Dallas, TX 75243-8278		
Principal occupation / Job title (See Instructions) Dir of Admin & Operations		Employer (See Instructions) Unlocking DOORS
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zatyko, Steven	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Coppell, TX 75019-7309		
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) Self employed
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zatyko, Steven	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Coppell, TX 75019-7309		
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) Self employed

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/2 Rpt: 125/199	
2 FILER NAME Johnson, Nathan M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081605	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 11/13/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrix, Michael	8 Amount of contribution (\$) \$1,789.00	9 In-kind contribution description Fundraising event catering, beverage and music
	7 Contributor address; City; State; Zip Code  Irving, TX 75061-2130		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Composites Manufacturing Engineer		11 Employer (FOR NON-JUDICIAL) (See instructions) Qarbon Aerospace	
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)			
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moak Casey, LLC	Amount of contribution (\$) \$245.93	In-kind contribution description Fundraising event food/beverage and venue rental
	Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montford, John	Amount of contribution (\$) \$350.00	In-kind contribution description Fundraising event advertising
	Contributor address; City; State; Zip Code  San Antonio, TX 78257		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) President/CEO		Employer (FOR NON-JUDICIAL) (See instructions) JTM Consulting	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 2/2 Rpt: 126/199	
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
<b>5</b> Date 11/14/2024	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montford, John	<b>8</b> Amount of contribution (\$) \$350.00	<b>9</b> In-kind contribution description Fundraising event advertising
	<b>7</b> Contributor address; City; State; Zip Code  San Antonio, TX 78257	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) President/CEO		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) JTM Consulting	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
---	---	--

<b>4</b> Date 12/17/2024	<b>5</b> Payee name 23rd Senatorial District Tejano Democrats
-----------------------------	--

<b>6</b> Amount (\$) \$300.00	<b>7</b> Payee address; City; State; Zip Code PO Box 226534  Dallas, TX 75222-6534
----------------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event contribution
---------------------------------	---	--

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 07/23/2024	Payee name AT&T
--------------------	--------------------

Amount (\$) \$65.60	Payee address; City; State; Zip Code 208 S Akard St Ste 2954 Dallas, TX 75202-4206
------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment utilities
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 08/22/2024	Payee name AT&T
--------------------	--------------------

Amount (\$) \$65.60	Payee address; City; State; Zip Code 208 S Akard St Ste 2954 Dallas, TX 75202-4206
------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment utilities
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 09/23/2024	<b>5</b> Payee name AT&T	
<b>6</b> Amount (\$) \$65.60	<b>7</b> Payee address; City; State; Zip Code 208 S Akard St Ste 2954 Dallas, TX 75202-4206	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment utilities
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/24/2024	Payee name AT&T	
Amount (\$) \$65.60	Payee address; City; State; Zip Code 208 S Akard St Ste 2954 Dallas, TX 75202-4206	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment utilities
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/25/2024	Payee name AT&T	
Amount (\$) \$65.60	Payee address; City; State; Zip Code 208 S Akard St Ste 2954 Dallas, TX 75202-4206	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment utilities
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/01/2024	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$1,071.77	<b>7</b> Payee address; City; State; Zip Code 366 Summer St  Somerville, MA 02144-3132	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fees - 7/1/24-12/14/24
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2024	Payee name Allen, Brenda	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1010 N Beckley Ave  Dallas, TX 75203-1331	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2024	Payee name Allen, Brenda	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1010 N Beckley Ave  Dallas, TX 75203-1331	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 09/30/2024	<b>5</b> Payee name Allen, Brenda	
<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code 1010 N Beckley Ave  Dallas, TX 75203-1331	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2024	Payee name Allen, Brenda	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1010 N Beckley Ave  Dallas, TX 75203-1331	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2024	Payee name Allen, Brenda	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 1010 N Beckley Ave  Dallas, TX 75203-1331	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/31/2024	<b>5</b> Payee name Allen, Brenda	
<b>6</b> Amount (\$) \$3,000.00	<b>7</b> Payee address; City; State; Zip Code 1010 N Beckley Ave  Dallas, TX 75203-1331	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2024	Payee name Allen, Brenda	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 1010 N Beckley Ave  Dallas, TX 75203-1331	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bonus
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name American Express	
Amount (\$) \$1,884.28	Payee address; City; State; Zip Code PO Box 6031  Carol Stream, IL 60197-6031	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 6/61 Rpt:	<b>2</b>	FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00081605
<b>4</b>	Date 12/30/2024	<b>5</b>	Payee name American Express		
<b>6</b>	Amount (\$) \$1,390.90	<b>7</b>	Payee address; City; State; Zip Code PO Box 6031  Carol Stream, IL 60197-6031		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment		
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 12/03/2024		Payee name American Express		
	Amount (\$) \$826.97		Payee address; City; State; Zip Code PO Box 6031  Carol Stream, IL 60197-6031		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 09/26/2024		Payee name American Express		
	Amount (\$) \$1,347.28		Payee address; City; State; Zip Code PO Box 6031  Carol Stream, IL 60197-6031		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
---	---	--

<b>4</b> Date 10/07/2024	<b>5</b> Payee name Annie's List
-----------------------------	-------------------------------------

<b>6</b> Amount (\$) \$5,000.00	<b>7</b> Payee address; City; State; Zip Code PO Box 303277  Austin, TX 78703-0055
------------------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
---------------------------------	---	--

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 07/15/2024	Payee name Bellagreen
--------------------	--------------------------

Amount (\$) \$98.74	Payee address; City; State; Zip Code 8041 Walnut Hill Ln Ste 810 Dallas, TX 75231-0956
------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting meal
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 10/22/2024	Payee name Berlin Rosen
--------------------	----------------------------

Amount (\$) \$54,176.24	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111
----------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct mail
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/24/2024	<b>5</b> Payee name Berlin Rosen	
<b>6</b> Amount (\$) \$54,115.70	<b>7</b> Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct mail
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/21/2024	Payee name Beyond the Slogan	
Amount (\$) \$1,050.00	Payee address; City; State; Zip Code 2710 Routh Creek Pkwy Apt 4120 Richardson, TX 75082-0158	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Debate watch party event promotion
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/06/2024	Payee name CCR Studios	
Amount (\$) \$487.13	Payee address; City; State; Zip Code 9501 Argyle Dr  Austin, TX 78749-5210	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event videographer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/04/2024	<b>5</b> Payee name CCR Studios	
<b>6</b> Amount (\$) \$1,514.42	<b>7</b> Payee address; City; State; Zip Code 9501 Argyle Dr  Austin, TX 78749-5210	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign holiday card photography
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/19/2024	Payee name Campaignly Group LLC	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 4615 Jeannes Ct  West Chester, OH 45069-9293	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital communications consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2024	Payee name Campaignly Group LLC	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 4615 Jeannes Ct  West Chester, OH 45069-9293	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital communications consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/19/2024	<b>5</b> Payee name Campaignly Group LLC	
<b>6</b> Amount (\$) \$2,000.00	<b>7</b> Payee address; City; State; Zip Code 4615 Jeannes Ct  West Chester, OH 45069-9293	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital communications consulting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/06/2024	Payee name Campaignly Group LLC	
Amount (\$) \$3,800.00	Payee address; City; State; Zip Code 4615 Jeannes Ct  West Chester, OH 45069-9293	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital communications consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/07/2024	Payee name Cassandra Hernandez Campaign	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code PO Box 1289  Addison, TX 75001-1289	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/09/2024	<b>5</b> Payee name City of Austin	
<b>6</b> Amount (\$) \$72.72	<b>7</b> Payee address; City; State; Zip Code 4815 Mueller Blvd  Austin, TX 78723-3573	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment utilities
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/06/2024	Payee name City of Austin	
Amount (\$) \$76.76	Payee address; City; State; Zip Code 4815 Mueller Blvd  Austin, TX 78723-3573	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment utilities
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2024	Payee name City of Austin	
Amount (\$) \$73.47	Payee address; City; State; Zip Code 4815 Mueller Blvd  Austin, TX 78723-3573	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment utilities
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/08/2024	<b>5</b> Payee name City of Austin	
<b>6</b> Amount (\$) \$71.10	<b>7</b> Payee address; City; State; Zip Code 4815 Mueller Blvd  Austin, TX 78723-3573	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment utilities
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/08/2024	Payee name City of Austin	
Amount (\$) \$70.22	Payee address; City; State; Zip Code 4815 Mueller Blvd  Austin, TX 78723-3573	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment utilities
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/10/2024	Payee name City of Austin	
Amount (\$) \$58.47	Payee address; City; State; Zip Code 4815 Mueller Blvd  Austin, TX 78723-3573	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment utilities
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/31/2024	<b>5</b> Payee name Clark, Ernest	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code 1259 Springbrook Dr  Desoto, TX 75115-3100	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/30/2024	Payee name Clark, Ernest	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1259 Springbrook Dr  Desoto, TX 75115-3100	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name Clark, Ernest	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1259 Springbrook Dr  Desoto, TX 75115-3100	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/31/2024	<b>5</b> Payee name Clark, Ernest	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code 1259 Springbrook Dr  Desoto, TX 75115-3100	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2024	Payee name Clark, Ernest	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1259 Springbrook Dr  Desoto, TX 75115-3100	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name Clark, Ernest	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1259 Springbrook Dr  Desoto, TX 75115-3100	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/18/2024	<b>5</b> Payee name Clark, Ernest	
<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code 1259 Springbrook Dr  Desoto, TX 75115-3100	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bonus
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/24/2024	Payee name Constant Contact	
Amount (\$) \$458.38	Payee address; City; State; Zip Code 1601 Trapelo Rd  Waltham, MA 02451-7333	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign email delivery subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/26/2024	Payee name Constant Contact	
Amount (\$) \$458.38	Payee address; City; State; Zip Code 1601 Trapelo Rd  Waltham, MA 02451-7333	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign email delivery subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 09/24/2024	<b>5</b> Payee name Constant Contact	
<b>6</b> Amount (\$) \$458.38	<b>7</b> Payee address; City; State; Zip Code 1601 Trapelo Rd  Waltham, MA 02451-7333	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign email delivery subscription
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/24/2024	Payee name 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign email delivery subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/25/2024	Payee name 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign email delivery subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/24/2024	<b>5</b> Payee name Constant Contact	
<b>6</b> Amount (\$) \$490.36	<b>7</b> Payee address; City; State; Zip Code 1601 Trapelo Rd  Waltham, MA 02451-7333	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign email delivery subscription
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2024	Payee name Cooley, Jordan	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 460 Bastrop Hwy S Apt 939 Austin, TX 78741-4332	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday bonus
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/21/2024	Payee name 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	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor day event tickets
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 18/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 08/22/2024	<b>5</b> Payee name Dallas County Democratic Party	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 1414 N Washington Ave  Dallas, TX 75204-5261	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event ticket
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/03/2024	Payee name Dallas County Democratic Party	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 1414 N Washington Ave  Dallas, TX 75204-5261	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense JJ Dinner Sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/25/2024	Payee name Dallas County Democratic Party	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 1414 N Washington Ave  Dallas, TX 75204-5261	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 09/06/2024	<b>5</b> Payee name Dallas County Young Democrats	
<b>6</b> Amount (\$) \$1,500.00	<b>7</b> Payee address; City; State; Zip Code 13224 Marrero Dr  Austin, TX 78729-7464	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/24/2024	Payee name Dallas County Young Democrats	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 13224 Marrero Dr  Austin, TX 78729-7464	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/12/2024	Payee name Dallas Democratic Forum	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 2101 Ross Ave  Dallas, TX 75201-2703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
--	---	--

<b>4</b> Date 09/06/2024	<b>5</b> Payee name Democracy Toolbox
-----------------------------	--

<b>6</b> Amount (\$) \$1,500.00	<b>7</b> Payee address; City; State; Zip Code 8552 Royal County Down Dr  Mckinney, TX 75070-1679
------------------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event texting service
---------------------------------	--	---

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 10/28/2024	Payee name Democracy Toolbox
--------------------	---------------------------------

Amount (\$) \$9,000.00	Payee address; City; State; Zip Code 8552 Royal County Down Dr  Mckinney, TX 75070-1679
---------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign general consulting services
-------------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 10/31/2024	Payee name Diaz, Alvaro
--------------------	----------------------------

Amount (\$) \$200.00	Payee address; City; State; Zip Code 2405 Montopolis Dr Apt 2224 Austin, TX 78741-6426
-------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 21/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/30/2024	<b>5</b> Payee name Diaz, Alvaro	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 2405 Montopolis Dr Apt 2224 Austin, TX 78741-6426	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name Diaz, Alvaro	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 2405 Montopolis Dr Apt 2224 Austin, TX 78741-6426	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2024	Payee name Diaz, Alvaro	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 2405 Montopolis Dr Apt 2224 Austin, TX 78741-6426	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bonus
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 22/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/21/2024	<b>5</b> Payee name Flower Child	
<b>6</b> Amount (\$) \$85.85	<b>7</b> Payee address; City; State; Zip Code 5959 Royal Ln  Dallas, TX 75230-3856	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal for staff
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/02/2024	Payee name Gables Park Plaza	
Amount (\$) \$2,824.61	Payee address; City; State; Zip Code 115 Sandra Muraida Way  Austin, TX 78703-4696	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/02/2024	Payee name Gables Park Plaza	
Amount (\$) \$2,840.88	Payee address; City; State; Zip Code 115 Sandra Muraida Way  Austin, TX 78703-4696	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 23/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 09/03/2024	<b>5</b> Payee name Gables Park Plaza	
<b>6</b> Amount (\$) \$2,828.69	<b>7</b> Payee address; City; State; Zip Code 115 Sandra Muraida Way  Austin, TX 78703-4696	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment rent
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2024	Payee name Gables Park Plaza	
Amount (\$) \$2,829.65	Payee address; City; State; Zip Code 115 Sandra Muraida Way  Austin, TX 78703-4696	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2024	Payee name Gables Park Plaza	
Amount (\$) \$2,828.81	Payee address; City; State; Zip Code 115 Sandra Muraida Way  Austin, TX 78703-4696	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 24/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/02/2024	<b>5</b> Payee name Google	
<b>6</b> Amount (\$) \$53.73	<b>7</b> Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043-1351	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace subscription
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/02/2024	Payee name Google	
Amount (\$) \$53.73	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043-1351	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/03/2024	Payee name Google	
Amount (\$) \$53.73	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043-1351	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 25/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/02/2024	<b>5</b> Payee name Google	
<b>6</b> Amount (\$) \$53.73	<b>7</b> Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043-1351	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace subscription
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/04/2024	Payee name Google	
Amount (\$) \$55.79	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043-1351	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/02/2024	Payee name Google	
Amount (\$) \$56.28	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043-1351	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 26/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 08/06/2024	<b>5</b> Payee name Green Apple Lane	
<b>6</b> Amount (\$) \$57.00	<b>7</b> Payee address; City; State; Zip Code PO Box 662  Kennedale, TX 76060-0662	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic design consulting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/07/2024	Payee name Green Apple Lane	
Amount (\$) \$130.00	Payee address; City; State; Zip Code PO Box 662  Kennedale, TX 76060-0662	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic design consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/05/2024	Payee name Green Apple Lane	
Amount (\$) \$117.00	Payee address; City; State; Zip Code PO Box 662  Kennedale, TX 76060-0662	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic design consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 27/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/12/2024	<b>5</b> Payee name Gutierrez, Sarah	
<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code 401 Middle Crk  Buda, TX 78610-2765	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/22/2024	Payee name Gutierrez, Sarah	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 Middle Crk  Buda, TX 78610-2765	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/13/2024	Payee name Gutierrez, Sarah	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 Middle Crk  Buda, TX 78610-2765	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 28/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/10/2024	<b>5</b> Payee name Gutierrez, Sarah	
<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code 401 Middle Crk  Buda, TX 78610-2765	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/13/2024	Payee name Gutierrez, Sarah	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 Middle Crk  Buda, TX 78610-2765	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/10/2024	Payee name Gutierrez, Sarah	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 Middle Crk  Buda, TX 78610-2765	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 29/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/02/2024	<b>5</b> Payee name Hill Country Springs	
<b>6</b> Amount (\$) \$48.57	<b>7</b> Payee address; City; State; Zip Code PO Box 2220  Manchaca, TX 78652-2220	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office water delivery
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/02/2024	Payee name Hill Country Springs	
Amount (\$) \$113.56	Payee address; City; State; Zip Code PO Box 2220  Manchaca, TX 78652-2220	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office water delivery
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/04/2024	Payee name Hill Country Springs	
Amount (\$) \$51.57	Payee address; City; State; Zip Code PO Box 2220  Manchaca, TX 78652-2220	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office water delivery
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 30/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/02/2024	<b>5</b> Payee name Hill Country Springs	
<b>6</b> Amount (\$) \$66.57	<b>7</b> Payee address; City; State; Zip Code PO Box 2220  Manchaca, TX 78652-2220	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office water delivery
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2024	Payee name Hill Country Springs	
Amount (\$) \$48.57	Payee address; City; State; Zip Code PO Box 2220  Manchaca, TX 78652-2220	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office water delivery
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2024	Payee name Hill Country Springs	
Amount (\$) \$48.57	Payee address; City; State; Zip Code PO Box 2220  Manchaca, TX 78652-2220	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office water delivery
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 31/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/22/2024	<b>5</b> Payee name Hootsuite	
<b>6</b> Amount (\$) \$158.83	<b>7</b> Payee address; City; State; Zip Code 111 East 5th Avenue  Vancouver BC V5T4L1 Canada	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social media management software
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/22/2024	Payee name Hootsuite	
Amount (\$) \$158.83	Payee address; City; State; Zip Code 111 East 5th Avenue  Vancouver BC V5T4L1 Canada	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social media management software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2024	Payee name Hootsuite	
Amount (\$) \$158.83	Payee address; City; State; Zip Code 111 East 5th Avenue  Vancouver BC V5T4L1 Canada	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social media management software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 32/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/22/2024	<b>5</b> Payee name Hootsuite	
<b>6</b> Amount (\$) \$158.83	<b>7</b> Payee address; City; State; Zip Code 111 East 5th Avenue  Vancouver BC V5T4L1 Canada	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social media management software
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/22/2024	Payee name Hootsuite	
Amount (\$) \$158.83	Payee address; City; State; Zip Code 111 East 5th Avenue  Vancouver BC V5T4L1 Canada	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social media management software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/23/2024	Payee name Hootsuite	
Amount (\$) \$158.83	Payee address; City; State; Zip Code 111 East 5th Avenue  Vancouver BC V5T4L1 Canada	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social media management software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 33/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/31/2024	<b>5</b> Payee name Hovatter, Keely	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code 5226 Basswood Ln  Austin, TX 78723-5450	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/30/2024	Payee name Hovatter, Keely	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 5226 Basswood Ln  Austin, TX 78723-5450	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name Hovatter, Keely	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 5226 Basswood Ln  Austin, TX 78723-5450	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 34/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
--	---	--

<b>4</b> Date 11/12/2024	<b>5</b> Payee name Hyatt Regency Mexico City
-----------------------------	--

<b>6</b> Amount (\$) \$1,829.00	<b>7</b> Payee address; City; State; Zip Code Campos Eliseos Numero 204 Colonia Polanco  Miguel Hidalgo DF 11560 Mexico
------------------------------------	--

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff lodging for officeholder trip
---------------------------------	---	---

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 08/08/2024	Payee name Inter Continental Hotel - Willard
--------------------	---

Amount (\$) \$353.16	Payee address; City; State; Zip Code 1401 Pennsylvania Ave NW  Washington, DC 20004-1047
-------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign meetings
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 07/31/2024	Payee name Internal Revenue Service
--------------------	--

Amount (\$) \$197.25	Payee address; City; State; Zip Code PO Box 93210  Louisville, KY 40293
-------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 35/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
--	---	--

<b>4</b> Date 08/31/2024	<b>5</b> Payee name Internal Revenue Service
-----------------------------	---

<b>6</b> Amount (\$) \$197.25	<b>7</b> Payee address; City; State; Zip Code PO Box 93210  Louisville, KY 40293
----------------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
---------------------------------	--	---

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 09/30/2024	Payee name Internal Revenue Service
--------------------	--

Amount (\$) \$197.25	Payee address; City; State; Zip Code PO Box 93210  Louisville, KY 40293
-------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 10/31/2024	Payee name Internal Revenue Service
--------------------	--

Amount (\$) \$558.00	Payee address; City; State; Zip Code PO Box 93210  Louisville, KY 40293
-------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 36/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/30/2024	<b>5</b> Payee name Internal Revenue Service	
<b>6</b> Amount (\$) \$376.13	<b>7</b> Payee address; City; State; Zip Code PO Box 93210  Louisville, KY 40293	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/31/2024	Payee name Internal Revenue Service	
Amount (\$) \$355.50	Payee address; City; State; Zip Code PO Box 93210  Louisville, KY 40293	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/18/2024	Payee name Internal Revenue Service	
Amount (\$) \$553.50	Payee address; City; State; Zip Code PO Box 93210  Louisville, KY 40293	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 37/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/31/2024	<b>5</b> Payee name Intuit	
<b>6</b> Amount (\$) \$156.70	<b>7</b> Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign accounting and payroll software subscription
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Intuit	
Amount (\$) \$156.70	Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign accounting and payroll software subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2024	Payee name Intuit	
Amount (\$) \$156.70	Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign accounting and payroll software subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 38/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/31/2024	<b>5</b> Payee name Intuit	
<b>6</b> Amount (\$) \$169.49	<b>7</b> Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign accounting and payroll software subscription
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Intuit	
Amount (\$) \$180.15	Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign accounting and payroll software subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name Intuit	
Amount (\$) \$186.55	Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign accounting and payroll software subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 39/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/30/2024	<b>5</b> Payee name Johnson, Nathan M	
<b>6</b> Amount (\$) \$181.25	<b>7</b> Payee address; City; State; Zip Code 7825 Firefall Way Apt 2534 Dallas, TX 75230-7325	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Schedule G Reimbursement
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2024	Payee name Johnson, Nathan M	
Amount (\$) \$27.14	Payee address; City; State; Zip Code 7825 Firefall Way Apt 2534 Dallas, TX 75230-7325	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2024	Payee name Johnson, Nathan M	
Amount (\$) \$48.31	Payee address; City; State; Zip Code 7825 Firefall Way Apt 2534 Dallas, TX 75230-7325	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 40/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 09/30/2024	<b>5</b> Payee name Johnson, Nathan M	
<b>6</b> Amount (\$) \$148.49	<b>7</b> Payee address; City; State; Zip Code 7825 Firefall Way Apt 2534 Dallas, TX 75230-7325	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/17/2024	Payee name Johnson, Nathan M	
Amount (\$) \$483.17	Payee address; City; State; Zip Code 7825 Firefall Way Apt 2534 Dallas, TX 75230-7325	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mileage reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/17/2024	Payee name Johnson, Nathan M	
Amount (\$) \$70.63	Payee address; City; State; Zip Code 7825 Firefall Way Apt 2534 Dallas, TX 75230-7325	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Schedule G Reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 41/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/31/2024	<b>5</b> Payee name Lappinga, Lani	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code 7014 Asbury Dr  Austin, TX 78724-3696	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/30/2024	Payee name Lappinga, Lani	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 7014 Asbury Dr  Austin, TX 78724-3696	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name Lappinga, Lani	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 7014 Asbury Dr  Austin, TX 78724-3696	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 42/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/31/2024	<b>5</b> Payee name Lappinga, Lani	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code 7014 Asbury Dr  Austin, TX 78724-3696	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2024	Payee name Lappinga, Lani	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 7014 Asbury Dr  Austin, TX 78724-3696	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name Lappinga, Lani	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 7014 Asbury Dr  Austin, TX 78724-3696	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 43/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/18/2024	<b>5</b> Payee name Lappinga, Lani	
<b>6</b> Amount (\$) \$1,500.00	<b>7</b> Payee address; City; State; Zip Code 7014 Asbury Dr  Austin, TX 78724-3696	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bonus
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/02/2024	Payee name Law Office of Julie Johnson	
Amount (\$) \$800.00	Payee address; City; State; Zip Code 12222 Merit Dr Ste 1200 Dallas, TX 75251-2231	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign office rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/30/2024	Payee name Law Office of Julie Johnson	
Amount (\$) \$800.00	Payee address; City; State; Zip Code 12222 Merit Dr Ste 1200 Dallas, TX 75251-2231	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign office rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 44/61 Rpt:	<b>2</b>	FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00081605	
<b>4</b>	Date 10/01/2024	<b>5</b>	Payee name Law Office of Julie Johnson			
<b>6</b>	Amount (\$) \$800.00	<b>7</b>	Payee address; City; State; Zip Code 12222 Merit Dr Ste 1200 Dallas, TX 75251-2231			
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign office rent			
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 11/01/2024		Payee name Law Office of Julie Johnson			
	Amount (\$) \$800.00		Payee address; City; State; Zip Code 12222 Merit Dr Ste 1200 Dallas, TX 75251-2231			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign office rent			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 11/29/2024		Payee name Law Office of Julie Johnson			
	Amount (\$) \$800.00		Payee address; City; State; Zip Code 12222 Merit Dr Ste 1200 Dallas, TX 75251-2231			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign office rent			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 45/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 12/31/2024	<b>5</b> Payee name Law Office of Julie Johnson	
<b>6</b> Amount (\$) \$800.00	<b>7</b> Payee address; City; State; Zip Code 12222 Merit Dr Ste 1200 Dallas, TX 75251-2231	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office rent
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/07/2024	Payee name Mihaela Plesa Campaign	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code PO Box 796311  Dallas, TX 75379-6311	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/06/2024	Payee name Morgan LaMantia Campaign	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1324 E Madison St  Brownsville, TX 78520-5758	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 46/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/03/2024	<b>5</b> Payee name NGP VAN	
<b>6</b> Amount (\$) \$345.32	<b>7</b> Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign database subscription
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2024	Payee name NGP VAN	
Amount (\$) \$159.90	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter contact subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/07/2024	Payee name NGP VAN	
Amount (\$) \$159.90	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter contact subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 47/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 08/26/2024	<b>5</b> Payee name NGP VAN	
<b>6</b> Amount (\$) \$345.32	<b>7</b> Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign database subscription
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/03/2024	Payee name NGP VAN	
Amount (\$) \$345.32	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign database subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/03/2024	Payee name NGP VAN	
Amount (\$) \$159.90	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter contact subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 48/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/03/2024	<b>5</b> Payee name NGP VAN	
<b>6</b> Amount (\$) \$159.90	<b>7</b> Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter contact software subscription
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 10/03/2024	Payee name NGP VAN	
Amount (\$) \$345.32	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign database subscription
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/04/2024	Payee name NGP VAN	
Amount (\$) \$345.32	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign database subscription
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 49/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/04/2024	<b>5</b> Payee name NGP VAN	
<b>6</b> Amount (\$) \$159.90	<b>7</b> Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter contact subscription
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2024	Payee name NGP VAN	
Amount (\$) \$345.32	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign database subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2024	Payee name Nguyen, Codi V	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 8701 W Parmer Ln Apt 1123 Austin, TX 78729-4942	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bonus
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 50/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 07/02/2024	<b>5</b> Payee name Paragon	
<b>6</b> Amount (\$) \$25.06	<b>7</b> Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/02/2024	Payee name Paragon	
Amount (\$) \$25.06	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Paragon	
Amount (\$) \$25.06	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 51/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/02/2024	<b>5</b> Payee name Paragon	
<b>6</b> Amount (\$) \$119.81	<b>7</b> Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2024	Payee name Paragon	
Amount (\$) \$597.00	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Paragon	
Amount (\$) \$25.06	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 52/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/31/2024	<b>5</b> Payee name Pirtle, Tammy	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code 7122 Wood Hollow Dr Apt 60 Austin, TX 78731-2546	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2024	Payee name Pirtle, Tammy	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 7122 Wood Hollow Dr Apt 60 Austin, TX 78731-2546	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name Pirtle, Tammy	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 7122 Wood Hollow Dr Apt 60 Austin, TX 78731-2546	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 53/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/23/2024	<b>5</b> Payee name Preston Hollow Democrats	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code PO Box 670631  Dallas, TX 75367-0631	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/13/2024	Payee name Progress Texas	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 132162  Dallas, TX 75313-2162	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2024	Payee name Rayo, Rose Marie	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 6831 Toland St  Dallas, TX 75227-3762	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 54/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 11/30/2024	<b>5</b> Payee name Rayo, Rose Marie	
<b>6</b> Amount (\$) \$250.00	<b>7</b> Payee address; City; State; Zip Code 6831 Toland St  Dallas, TX 75227-3762	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/31/2024	Payee name 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	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/18/2024	Payee name Rayo, Rose Marie	
Amount (\$) \$1,000.00	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	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bonus
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 55/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 10/24/2024	<b>5</b> Payee name SquareSpace	
<b>6</b> Amount (\$) \$294.22	<b>7</b> Payee address; City; State; Zip Code 225 Varick St  New York, NY 10014-4304	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign website hosting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/12/2024	Payee name Taberna del Alabardero	
Amount (\$) \$417.36	Payee address; City; State; Zip Code 1776 I St NW Ste 255 Washington, DC 20006-3750	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting with colleagues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/12/2024	Payee name Texas Association of Business	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 316 W 12th St  Austin, TX 78701-1815	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Conference fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 56/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 08/12/2024	<b>5</b> Payee name Texas Blue Action Democrats	
<b>6</b> Amount (\$) \$2,500.00	<b>7</b> Payee address; City; State; Zip Code PO Box 41424  Austin, TX 78704-0024	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/09/2024	Payee name Texas Democratic Party	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 15707  Austin, TX 78761-5707	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/09/2024	Payee name Texas Democratic Party	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 15707  Austin, TX 78761-5707	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 57/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 08/02/2024	<b>5</b> Payee name Texas Senate Democratic Caucus	
<b>6</b> Amount (\$) \$5,000.00	<b>7</b> Payee address; City; State; Zip Code PO Box 1042  Austin, TX 78767-1042	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Caucus dues
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2024	Payee name Texas Workforce Commission	
Amount (\$) \$28.00	Payee address; City; State; Zip Code 101 E 15th St  Austin, TX 78701-1442	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2024	Payee name Texas Workforce Commission	
Amount (\$) \$28.00	Payee address; City; State; Zip Code 101 E 15th St  Austin, TX 78701-1442	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 58/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 09/30/2024	<b>5</b> Payee name Texas Workforce Commission	
<b>6</b> Amount (\$) \$28.00	<b>7</b> Payee address; City; State; Zip Code 101 E 15th St  Austin, TX 78701-1442	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/31/2024	Payee name Texas Workforce Commission	
Amount (\$) \$47.60	Payee address; City; State; Zip Code 101 E 15th St  Austin, TX 78701-1442	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/30/2024	Payee name Texas Workforce Commission	
Amount (\$) \$37.80	Payee address; City; State; Zip Code 101 E 15th St  Austin, TX 78701-1442	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 59/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
--	---	--

<b>4</b> Date 12/31/2024	<b>5</b> Payee name Texas Workforce Commission
-----------------------------	---

<b>6</b> Amount (\$) \$16.80	<b>7</b> Payee address; City; State; Zip Code 101 E 15th St  Austin, TX 78701-1442
---------------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
---------------------------------	--	---

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 12/18/2024	Payee name Texas Workforce Commission
--------------------	--

Amount (\$) \$98.00	Payee address; City; State; Zip Code 101 E 15th St  Austin, TX 78701-1442
------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 07/11/2024	Payee name United Airlines
--------------------	-------------------------------

Amount (\$) \$359.77	Payee address; City; State; Zip Code 233 S Wacker Dr  Chicago, IL 60606-7147
-------------------------	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff travel from NCSL conference
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 60/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 08/07/2024	<b>5</b> Payee name United Airlines	
<b>6</b> Amount (\$) \$50.00	<b>7</b> Payee address; City; State; Zip Code 233 S Wacker Dr  Chicago, IL 60606-7147	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Baggage fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/07/2024	Payee name United Airlines	
Amount (\$) \$279.47	Payee address; City; State; Zip Code 233 S Wacker Dr  Chicago, IL 60606-7147	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Air travel for staff
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/07/2024	Payee name United Airlines	
Amount (\$) \$54.70	Payee address; City; State; Zip Code 233 S Wacker Dr  Chicago, IL 60606-7147	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Baggage fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 61/61 Rpt:	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605	
<b>4</b> Date 08/16/2024	<b>5</b> Payee name United States Postal Service		
<b>6</b> Amount (\$) \$256.00	<b>7</b> Payee address; City; State; Zip Code 8135 Forest Ln  Dallas, TX 75230-2472		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PO Box renewal	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 1/8 Rpt: 188/199		<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605	
<b>4</b> CREDIT CARD ISSUER		Name of financial institution American Express		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,431.59	
<b>6</b> PAYMENT		(a) Amount Charged \$519.59	(b) Date of Charge 11/05/2024	(c) Date(s) Credit Card Issuer Paid 12/03/2024	
<b>7</b> PAYEE		(a) Payee name Best Buy		(b) Payee address; City, State, Zip Code 9387 N Central Expy Dallas, TX 75231-5009	
<b>8</b> PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Campaign computer equipment	
		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
<b>PAYMENT</b>		(a) Amount Charged \$578.81	(b) Date of Charge 09/27/2024	(c) Date(s) Credit Card Issuer Paid 11/05/2024	
<b>PAYEE</b>		(a) Payee name Aeromexico		(b) Payee address; City, State, Zip Code Av. Tahel s/n Pensador Mexicano Venustiano Carranza Ciudad de Mexico CDMX 15620 Mexico	
<b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Staff travel to attend conference	
		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
<b>PAYMENT</b>		(a) Amount Charged \$1.43	(b) Date of Charge 09/13/2024	(c) Date(s) Credit Card Issuer Paid 09/26/2024	
<b>PAYEE</b>		(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 6031 Carol Stream, IL 60197-6031	
<b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Foreign transaction fee	
		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 2/8 Rpt: 189/199	<b>2</b>	FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00081605
<b>4</b>	<b>CREDIT CARD ISSUER</b>	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,431.59
<b>6</b>	<b>PAYMENT</b>	(a) Amount Charged \$1.39	(b) Date of Charge 09/13/2024	(c) Date(s) Credit Card Issuer Paid 09/26/2024	
<b>7</b>	<b>PAYEE</b>	(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 6031 Carol Stream, IL 60197-6031	
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Foreign transaction fee	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$0.16	(b) Date of Charge 09/13/2024	(c) Date(s) Credit Card Issuer Paid 09/26/2024		
<b>PAYEE</b>	(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 6031 Carol Stream, IL 60197-6031		
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Foreign transaction fee		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
<b>PAYMENT</b>	(a) Amount Charged \$0.42	(b) Date of Charge 09/13/2024	(c) Date(s) Credit Card Issuer Paid 09/26/2024		
<b>PAYEE</b>	(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 6031 Carol Stream, IL 60197-6031		
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Foreign transaction fee		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 3/8 Rpt: 190/199	<b>2</b>	FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00081605
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,431.59
<b>6</b>	PAYMENT	(a) Amount Charged \$2.09	(b) Date of Charge 09/30/2024	(c) Date(s) Credit Card Issuer Paid 11/05/2024	
<b>7</b>	PAYEE	(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 6031 Carol Stream, IL 60197-6031	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Foreign transaction fee	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$0.75	(b) Date of Charge 09/30/2024	(c) Date(s) Credit Card Issuer Paid 11/05/2024	
<b>7</b>	PAYEE	(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 6031 Carol Stream, IL 60197-6031	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Foreign transaction fee	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$1.64	(b) Date of Charge 10/02/2024	(c) Date(s) Credit Card Issuer Paid 11/05/2024	
<b>7</b>	PAYEE	(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 6031 Carol Stream, IL 60197-6031	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Foreign transaction fee	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 4/8 Rpt: 191/199	<b>2</b>	FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00081605
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,431.59
<b>6</b>	PAYMENT	(a) Amount Charged \$1.44	(b) Date of Charge 10/03/2024	(c) Date(s) Credit Card Issuer Paid 11/05/2024	
<b>7</b>	PAYEE	(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 6031 Carol Stream, IL 60197-6031	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Foreign transaction fee	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$0.51	(b) Date of Charge 10/04/2024	(c) Date(s) Credit Card Issuer Paid 11/05/2024	
<b>7</b>	PAYEE	(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 6031 Carol Stream, IL 60197-6031	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Foreign transaction fee	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$2.57	(b) Date of Charge 10/04/2024	(c) Date(s) Credit Card Issuer Paid 11/05/2024	
<b>7</b>	PAYEE	(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 6031 Carol Stream, IL 60197-6031	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Foreign transaction fee	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 5/8 Rpt: 192/199	<b>2</b>	FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00081605
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,431.59
<b>6</b>	PAYMENT	(a) Amount Charged \$0.59	(b) Date of Charge 10/04/2024	(c) Date(s) Credit Card Issuer Paid 11/05/2024	
<b>7</b>	PAYEE	(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 6031  Carol Stream, IL 60197-6031	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Foreign transaction fee	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$112.21	(b) Date of Charge 09/27/2024	(c) Date(s) Credit Card Issuer Paid 11/05/2024		
<b>PAYEE</b>	(a) Payee name Bellagreen	(b) Payee address; City, State, Zip Code 8041 Walnut Hill Ln Ste 810 Dallas, TX 75231-0956			
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meeting meal		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
<b>PAYMENT</b>	(a) Amount Charged \$49.97	(b) Date of Charge 10/24/2024	(c) Date(s) Credit Card Issuer Paid 11/05/2024		
<b>PAYEE</b>	(a) Payee name Bellagreen	(b) Payee address; City, State, Zip Code 8041 Walnut Hill Ln Ste 810 Dallas, TX 75231-0956			
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meeting meal		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	



# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 6/8 Rpt: 193/199		<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605	
<b>4</b> CREDIT CARD ISSUER		Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,431.59	
<b>6</b> PAYMENT		(a) Amount Charged \$20.00	(b) Date of Charge 10/04/2024	(c) Date(s) Credit Card Issuer Paid 11/05/2024	
<b>7</b> PAYEE		(a) Payee name Dallas County Democratic Party		(b) Payee address; City, State, Zip Code 1414 N Washington Ave Dallas, TX 75204-5261	
<b>8</b> PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Contribution	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
<b>PAYMENT</b>		(a) Amount Charged \$195.97	(b) Date of Charge 12/02/2024	(c) Date(s) Credit Card Issuer Paid 12/30/2024	
<b>PAYEE</b>		(a) Payee name Flower Child		(b) Payee address; City, State, Zip Code 5959 Royal Ln Dallas, TX 75230-3856	
<b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Food/Beverage Expense		(b) Description Meal for staff	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
<b>PAYMENT</b>		(a) Amount Charged \$95.42	(b) Date of Charge 10/04/2024	(c) Date(s) Credit Card Issuer Paid 11/05/2024	
<b>PAYEE</b>		(a) Payee name Hyatt Regency Mexico City		(b) Payee address; City, State, Zip Code Campos Eliseos Numero 204 Colonia Polanco Miguel Hidalgo DF 11560 Mexico	
<b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Food/Beverage Expense		(b) Description Travel meal	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 7/8 Rpt: 194/199	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,431.59
<b>6</b> PAYMENT	(a) Amount Charged \$261.94	(b) Date of Charge 09/23/2024	(c) Date(s) Credit Card Issuer Paid 09/26/2024
<b>7</b> PAYEE	(a) Payee name Target	(b) Payee address; City, State, Zip Code 9440 Marsh Ln Dallas, TX 75220-4924	
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Lamps for Capitol Office
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$124.49	(b) Date of Charge 10/13/2024	(c) Date(s) Credit Card Issuer Paid 11/05/2024
<b>PAYEE</b>	(a) Payee name Target	(b) Payee address; City, State, Zip Code 9440 Marsh Ln Dallas, TX 75220-4924	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$17.32	(b) Date of Charge 12/01/2024	(c) Date(s) Credit Card Issuer Paid 12/30/2024
<b>PAYEE</b>	(a) Payee name Target	(b) Payee address; City, State, Zip Code 9440 Marsh Ln Dallas, TX 75220-4924	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 8/8 Rpt: 195/199	<b>2</b>	FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00081605
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,431.59
<b>6</b>	PAYMENT	(a) Amount Charged \$172.36	(b) Date of Charge 12/06/2024	(c) Date(s) Credit Card Issuer Paid 12/30/2024	
<b>7</b>	PAYEE	(a) Payee name Target		(b) Payee address; City, State, Zip Code 9440 Marsh Ln Dallas, TX 75220-4924	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office supplies	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$779.31	(b) Date of Charge 11/23/2024	(c) Date(s) Credit Card Issuer Paid 12/30/2024		
<b>PAYEE</b>	(a) Payee name Zwilling	(b) Payee address; City, State, Zip Code 270 Marble Ave Pleasantville, NY 10570-3464			
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Holiday gifts for staff		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
<b>PAYMENT</b>	(a) Amount Charged \$77.46	(b) Date of Charge 09/30/2024	(c) Date(s) Credit Card Issuer Paid 11/05/2024		
<b>PAYEE</b>	(a) Payee name Hyatt Regency Mexico City	(b) Payee address; City, State, Zip Code Campos Eliseos Numero 204 Colonia Polanco Miguel Hidalgo DF 11560 Mexico			
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Travel meal		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/2 Rpt: 196/199	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Date 09/23/2024	<b>5</b> Payee name AT&T	
<b>6</b> Amount (\$) \$60.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 208 S Akard St Ste 2954 Dallas, TX 75202-4206	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense International plan while on officeholder trip
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 12/17/2024	Payee name AT&T	
Amount (\$) \$70.63  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 208 S Akard St Ste 2954 Dallas, TX 75202-4206	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin apartment utilities
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/11/2024	Payee name Lyby Strand	
Amount (\$) \$55.01  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code Lyby Strandvej 35  Roslev Denmark	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel meal
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 2/2 Rpt: 197/199	<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00081605
---	---	--

<b>4</b> Date 09/12/2024	<b>5</b> Payee name Monarch Nyborg
-----------------------------	---------------------------------------

<b>6</b> Amount (\$) \$10.78  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code Hjejlevej 107  Nyborg 5800 Denmark
--	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Officeholder travel meal
---------------------------------	--	---

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 09/20/2024	Payee name Snooze
--------------------	----------------------

Amount (\$) \$55.46  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8401 WALNUT HILL Ln Ste 846 Dallas, TX 75231
---	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting meal with consultant
-------------------------------	---	--

Complete ONLY 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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule T: Sch: 1/2 Rpt: 198/199
<b>2</b> FILER NAME Johnson, Nathan M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00081605
<b>4</b> Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Aeromexico		
<b>5</b> Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input checked="" type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
<b>6</b> Dates of Travel  09/30/2024  09/30/2024	<b>7</b> Name of person(s) traveling Lappinga, Lani	
	<b>8</b> Departure city or name of departure location Austin	
	<b>9</b> Destination city or name of destination location Mexico City	
<b>10</b> Means of transportation Commercial Airplane	<b>11</b> Purpose of travel (including name of conference, seminar, or other event) Staff air travel to conference	
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Aeromexico		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input checked="" type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
Dates of Travel  10/04/2024  10/04/2024	Name of person(s) traveling Lappinga, Lani	
	Departure city or name of departure location Mexico City	
	Destination city or name of destination location Austin	
Means of transportation Commercial Airplane	Purpose of travel (including name of conference, seminar, or other event) Staff air travel from conference	
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee United Airlines		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
Dates of Travel  08/08/2024  08/08/2024	Name of person(s) traveling Lappinga, Lani	
	Departure city or name of departure location Louisville	
	Destination city or name of destination location Austin	
Means of transportation Commercial Airplane	Purpose of travel (including name of conference, seminar, or other event) Staff travel from NCSL conference	

# 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 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

08/08/2024

08/08/2024

7 Name of person(s) traveling

Lappinga, Lani

8 Departure city or name of departure location

Louisville, KY

9 Destination city or name of destination location

Washington, DC

10 Means of transportation

Commercial Airplane

11 Purpose of travel (including name of conference, seminar, or other event)

Staff travel from NCSL conference to DC for meetings