#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00069305 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Association of Nurse Anesthetists Political Action Committee Date Received **ELECTRONICALLY FILED** 04/07/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 919 Congress Ave., Suite 720 Austin, TX 78701 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Ms. Andrea N. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Pee CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER 919 Congress Ave., Suite 720 STREET **ADDRESS** (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET ADDRESS OR PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 919 Congress Ave., Suite 720 MAILING **ADDRESS** Austin, TX 78701 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 495-9004 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 X April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 02/26/2025 03/25/2025

**GO TO PAGE 2** 

## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

		<u> </u>		
COMMITTEE NAME	Luras Apasthatista Daliti		Filer ID	(Ethics Commission Filers)
Texas Association of N	lurse Anesthetists Politi	cal Action Committee	00069305	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if	A. Supported		
	applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location	7. Supported		
	of election and nature of issue.)			
		B. Opposed		
	<ol><li>Officeholders Assisted</li></ol>			
	(Identify by name or, if applicable, classify by party.)			
CONTRIBUTION		D POLITICAL CONTRIBUTIONS (OTHER THAN		
TOTALS	CONTRIBUTIONS N	OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICA	qualifies for the higher itemization threshold  L CONTRIBUTIONS		
		DGES, LOANS, OR GUARANTEES OF LOANS)	\$	12,148.82
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	4.005.45
				1,385.15
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST DA G PERIOD	<b>\$</b>	69,305.30
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD	\$	0.00
6 AFFIDAVIT	<u> </u>		<u> </u>	
		I swear, or affirm, under penalty of perjur true and correct and includes all informat under Title 15, Election Code.	y, that the accition required t	companying report is to be reported by me
		Ms. Andrea		
		Signature of Campa	aign Treasure	Pr .
AFFIX NOTAR	Y STAMP / SEAL ABOVE			
	d before me, by the said	, this	the	day
Sworn to and subscribe				
		which, witness my hand and seal of office.		
		which, witness my hand and seal of office.		
		which, witness my hand and seal of office.		

### **SUBTOTALS - MPAC**

# FORM MPAC COVER SHEET PG 3

					3 of 39
<b>17</b> CO	MMITTE	EE NAME	18 Filer ID	(Ethics Co	mmission Filers)
Tex	as Ass	sociation of Nurse Anesthetists Political Action Committee	00069305		
		E SUBTOTALS SCHEDULE		SUB'	TOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	10,836.88
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$		
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS	\$		
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$	
6.	X	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	511.94
7.	X	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	800.00
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	1,385.15
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	0.47

	MONEI	ARY POLITICAL CO	ONTRIBUTIO	ONS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how t	o complete this fe	orm.	1	Total pages Schedule A1: Sch: 1/30 Rpt: 4/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Po	litical Action Commit	tee	3	Filer ID (Ethics Commission 00069305	Filers)
4	Date 03/14/2025	<ul><li>5 Full name of contributor Abigail, Caswell</li><li>6 Contributor address; City; Stat</li></ul>	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$83.33
8		Friendswood, TX 77546 pation / Job title (See Instructions) gistered Nurse Anesthetist		9 Employer (See Instructions	<u> </u> ;)		
	Date 03/20/2025	Full name of contributor Adam, Watters  Contributor address; City; Stat	out-of-state PAC (ID#:_ e; Zip Code			Amount of Contribution (\$)	\$30.00
		pation / Job title (See Instructions) gistered Nurse Anesthetist		Employer (See Instructions	<u> </u> 5)		
	Date 03/24/2025	Full name of contributor  Aiya, Wommack  Contributor address; City; Stat	out-of-state PAC (ID#:_ e; Zip Code			Amount of Contribution (\$)	\$83.33
		Naples, TX 75568					
		pation / Job title (See Instructions) gistered Nurse Anesthetist		Employer (See Instructions	s)		
	Date 02/26/2025	Full name of contributor  Alyssa, Pugh  Contributor address; City; Stat  Cresson, TX 76035	out-of-state PAC (ID#:_ e; Zip Code			Amount of Contribution (\$)	\$41.67
	•	pation / Job title (See Instructions) gistered Nurse Anesthetist		Employer (See Instructions	<u> </u> 5)		
	Date 03/20/2025	Full name of contributor Amanda, McKinney Contributor address; City; Stat	out-of-state PAC (ID#:_ e; Zip Code			Amount of Contribution (\$)	\$30.00
		pation / Job title (See Instructions) gistered Nurse Anesthetist		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/30 Rpt: 5/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Political Action Commit	tee	3	Filer ID (Ethics Commission 00069305	n Filers)
4	Date 03/21/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$41.67
_	<u> </u>	Dickinson, TX 77539				
8		pation / Job title (See Instructions) pistered Nurse Anesthetist	9 Employer (See Instructions	5)		
	Date 03/20/2025	Full name of contributor out-of-state PAC (ID#:_Amy, Sheppard  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	D: : 1	Fort Worth, TX 76111		Ĺ		
	•	pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	5)		
	Date 03/25/2025	Full name of contributor out-of-state PAC (ID#:_Angelica, Mata  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$300.00
		McAllen, TX 78504				
	•	pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	<u>,</u>		
	Date 03/21/2025	Full name of contributor out-of-state PAC (ID#:_Anthony, Vo  Contributor address; City; State; Zip Code  Austin, TX 78717	)		Amount of Contribution (\$)	\$83.33
	•	pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 03/14/2025	Full name of contributor out-of-state PAC (ID#:_Arianne, Pichon  Contributor address; City; State; Zip Code  Buda, TX 78610			Amount of Contribution (\$)	\$41.67
		pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	5)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/30 Rpt: 6/39	
2	FILER NAME Texas Assoc	ciation of Nurse Anesthetists P	olitical Action Commit	tee	3	Filer ID (Ethics Commission 00069305	n Filers)
4	Date 03/20/2025	<ul><li>5 Full name of contributor Ashley, Cook</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:_ atte; Zip Code		7	Amount of Contribution (\$)	\$83.33
8		Frisco, TX 75035 pation / Job title (See Instructions) gistered Nurse Anesthetist		9 Employer (See Instructions	<u> </u> ;)		
	Date 03/07/2025	Full name of contributor Ashley, Wilson Contributor address; City; Sta	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$100.00
		pation / Job title (See Instructions)		Employer (See Instructions	<u>                                      </u>		
	Date 02/27/2025	Full name of contributor Benjamin, Lockmiller Contributor address; City; Sta	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$500.00
		San Antonio, TX 78209 pation / Job title (See Instructions) gistered Nurse Anesthetist	)	Employer (See Instructions	<u> </u> 5)		
	Date 03/20/2025	Full name of contributor Beth, Heathington  Contributor address; City; Sta	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$30.00
	•	pation / Job title (See Instructions) gistered Nurse Anesthetist		Employer (See Instructions	5)		
	Date 03/24/2025	Full name of contributor Bhavika, Patel Contributor address; City; Sta	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$83.33
		pation / Job title (See Instructions) gistered Nurse Anesthetist		Employer (See Instructions	5)		

	MONEI	ARY POLITICAL CO	NTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/30 Rpt: 7/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Politi	cal Action Committ	ee	3	3 Filer ID (Ethics Commission Filers) 00069305	
4	Date 03/10/2025	Bibin, Abraham  6 Contributor address; City; State;	out-of-state PAC (ID#:_ Zip Code	)	7	Amount of Contribution (\$)	\$100.00
8		Irving, TX 75063 pation / Job title (See Instructions) gistered Nurse Anesthetist		9 Employer (See Instructions	5)		
	Date 03/21/2025	Full name of contributor  Breno, Teixeira  Contributor address; City; State;  McAllen, TX 78504	out-of-state PAC (ID#:_ Zip Code	)		Amount of Contribution (\$)	\$41.67
		pation / Job title (See Instructions) gistered Nurse Anesthetist		Employer (See Instructions	5)		
	Date 03/22/2025	Full name of contributor  Brian, Cornelius  Contributor address; City; State;	out-of-state PAC (ID#:  Zip Code			Amount of Contribution (\$)	\$83.33
	District	Burleson, TX 76028		Foundament (October American	Ĺ		
		pation / Job title (See Instructions) gistered Nurse Anesthetist		Employer (See Instructions	')		
	Date 03/07/2025	Full name of contributor  Brian, Gegel  Contributor address; City; State;  San Antonio, TX 78258	out-of-state PAC (ID#:_ Zip Code			Amount of Contribution (\$)	\$41.67
	•	pation / Job title (See Instructions) gistered Nurse Anesthetist		Employer (See Instructions	i)		
	Date 03/22/2025	Full name of contributor Brian, Walford Contributor address; City; State; Victoria, TX 77904	out-of-state PAC (ID#:_ Zip Code	)		Amount of Contribution (\$)	\$83.33
		pation / Job title (See Instructions) gistered Nurse Anesthetist		Employer (See Instructions	i)		
_							

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 5/30 Rpt: 8/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Political Action Comm	ittee	3	Filer ID (Ethics Commission 00069305	ı Filers)
4	Date 03/09/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID# Brian, Walker</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$41.67
_		Harlingen, TX 78552	1	Ĺ		
8		pation / Job title (See Instructions) histered Nurse Anesthetist	9 Employer (See Instructions	5)		
	Date 02/28/2025	Full name of contributor  out-of-state PAC (ID# Brittaney, Ross  Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$30.00
		Dallas, TX 75206	_			
	•	pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	5)		
	Date 03/12/2025	Full name of contributor  out-of-state PAC (ID# Catherine, Reidy  Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$83.33
		Granbury, TX 76049				
		pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	5)		
	Date 03/21/2025	Full name of contributor out-of-state PAC (ID# Catherine, Smith Contributor address; City; State; Zip Code Manvel, TX 77578	:)	•	Amount of Contribution (\$)	\$83.33
	•	pation / Job title (See Instructions) sistered Nurse Anesthetist	Employer (See Instructions	<u>(</u>		
	Date 03/01/2025	Full name of contributor out-of-state PAC (ID# Charity, Magcalas  Contributor address; City; State; Zip Code  Celina, TX 75009	:)		Amount of Contribution (\$)	\$83.33
		pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/30 Rpt: 9/39	
2	FILER NAME Texas Assoc	ciation of Nurse Anesthetists Political Action Commit	tee	3	Filer ID (Ethics Commission 00069305	ı Filers)
4	Date 03/05/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$41.67
0	Dringing occu	Friendswood, TX 77546 pation / Job title (See Instructions)	Employer (See Instructions			
8		gistered Nurse Anesthetist	9 Employer (See Instructions	)		
	Date 03/24/2025	Full name of contributor out-of-state PAC (ID#:_ Cora, Rabe Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$83.33
	Principal occu	Humble, TX 77396-3888 pation / Job title (See Instructions)	Employer (See Instructions			
	Certified Registered Nurse Anesthetist					
	Date 03/21/2025	Full name of contributor out-of-state PAC (ID#:_ Cristina, Garza Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$75.00
		Mansfield, TX 76064				
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 03/20/2025	Full name of contributor out-of-state PAC (ID#:_ Cynthia, Crowell Contributor address; City; State; Zip Code  Dallas, TX 75287			Amount of Contribution (\$)	\$83.33
	•	pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 02/28/2025	Full name of contributor out-of-state PAC (ID#:_ Daniel, Hammonds  Contributor address; City; State; Zip Code  Midlothian, TX 76065	)		Amount of Contribution (\$)	\$83.33
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		

	MONEI	ARY POLITICAL CONTI	RIBUTIO	ONS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to com	plete this fo	orm.	1	Total pages Schedule A1: Sch: 7/30 Rpt: 10/39	
2	FILER NAME	iation of Nurse Aposthatista Delitical As	ation Commit	too	3	Filer ID (Ethics Commission	Filers)
		iation of Nurse Anesthetists Political Ac		lee		00069305	
4	Date 03/18/2025	<ul> <li>Full name of contributor  out-of-s</li> <li>Danielle, Wilderman</li> <li>Contributor address; City; State; Zip Co</li> </ul>	state PAC (ID#:_ ode	)	7	Amount of Contribution (\$)	\$83.33
8	Principal occu	Waxahachie, TX 75167 pation / Job title (See Instructions)	1	Employer (See Instructions	(;)		
		istered Nurse Anesthetist		, ,,, (	,		
	Date 02/28/2025		state PAC (ID#:_			Amount of Contribution (\$)	\$83.33
		Ft worth, TX 76133					
		pation / Job title (See Instructions) histered Nurse Anesthetist		Employer (See Instructions	i)		
	Date 03/19/2025	Full name of contributor out-of-s  DeaAnn, Martin  Contributor address; City; State; Zip Co	state PAC (ID#:_			Amount of Contribution (\$)	\$41.67
		Parker, TX 75002					
		pation / Job title (See Instructions) istered Nurse Anesthetist		Employer (See Instructions	<u>(</u>		
	Date 02/28/2025	Full name of contributor out-of-s  Debra, Krenek  Contributor address; City; State; Zip Co	state PAC (ID#:_			Amount of Contribution (\$)	\$30.00
		oation / Job title (See Instructions) istered Nurse Anesthetist		Employer (See Instructions	<u> </u>		
	Date 03/07/2025	Full name of contributor out-of-s Deniz, Dishman Contributor address; City; State; Zip Co	state PAC (ID#:_			Amount of Contribution (\$)	\$83.33
		pation / Job title (See Instructions) pistered Nurse Anesthetist		Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 8/30 Rpt: 11/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Political Action Comm	nittee	3	Filer ID (Ethics Commission 00069305	ı Filers)
4	Date 03/22/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$83.33
_	Dringing Lagor	Austin, TX 78757	D. Faralavar (Can Instructions	_		
8		pation / Job title (See Instructions) istered Nurse Anesthetist	9 Employer (See Instructions	5)		
	Date 02/26/2025	Full name of contributor out-of-state PAC (ID: Diana P, Wilson  Contributor address; City; State; Zip Code	#:)	•	Amount of Contribution (\$)	\$30.00
		Cedar Creek, TX 78612				
		oation / Job title (See Instructions) istered Nurse Anesthetist	Employer (See Instructions	s)		
	Date 02/28/2025	Full name of contributor out-of-state PAC (ID: Douglas, Massey  Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$83.33
		San Antonio, TX 78260				
		oation / Job title (See Instructions) istered Nurse Anesthetist	Employer (See Instructions	5)		
	Date 03/23/2025	Full name of contributor out-of-state PAC (ID) Editha, Flemming Contributor address; City; State; Zip Code  Manvel, TX 77578	#:) 		Amount of Contribution (\$)	\$41.67
		pation / Job title (See Instructions) istered Nurse Anesthetist	Employer (See Instructions	<u>I</u> S)		
	Date 03/10/2025	Full name of contributor out-of-state PAC (ID) Emily, Winter Contributor address; City; State; Zip Code  League City, TX 77573	#:)		Amount of Contribution (\$)	\$30.00
		oation / Job title (See Instructions) istered Nurse Anesthetist	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBU	UTIONS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete	this form.	1	Total pages Schedule A1: Sch: 9/30 Rpt: 12/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Political Action C	Committee	3	Filer ID (Ethics Commission 00069305	ı Filers)
4	Date 02/26/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$41.67
_	Deinsinal assu	Katy, TX 77493	O Family or (Cool in thrustian	<u></u>		
8		pation / Job title (See Instructions) histered Nurse Anesthetist	9 Employer (See Instructions	5)		
	Date 03/20/2025	Full name of contributor out-of-state PAGE ricka, Whittaker  Contributor address; City; State; Zip Code	AC (ID#:)	•	Amount of Contribution (\$)	\$30.00
	Deinsinal assu	Midland, TX 79707	Franks var (Cala Instructions	<u></u>		
	•	pation / Job title (See Instructions) histered Nurse Anesthetist	Employer (See Instructions	o)		
	Date 03/20/2025	Full name of contributor  out-of-state PAGE  cirn, McLaughlin  Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$30.00
		Frisco, TX 75035				
		pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	5)		
	Date 03/07/2025	Full name of contributor out-of-state PAGE Garrett, Dupree  Contributor address; City; State; Zip Code  Fort Worth, TX 76126	AC (ID#:)	•	Amount of Contribution (\$)	\$30.00
	•	pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	5)		
	Date 02/27/2025	Full name of contributor out-of-state PAGE Gregory, Collins  Contributor address; City; State; Zip Code  Granbury, TX 76049	AC (ID#:)		Amount of Contribution (\$)	\$83.33
		pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	5)		
			l			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/30 Rpt: 13/39	
2	FILER NAME Texas Assoc	ciation of Nurse Anesthetists Political Action Commit	tee	3	Filer ID (Ethics Commission 00069305	n Filers)
4	Date 03/22/2025	Full name of contributor	)	7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Houston, TX 77098  pation / Job title (See Instructions)	9 Employer (See Instructions			
0		gistered Nurse Anesthetist	S Employer (See Instructions	,		
	Date 03/22/2025	Full name of contributor out-of-state PAC (ID#:_ Haley, Jordan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Belton, TX 76513 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Certified Registered Nurse Anesthetist					
	Date 03/04/2025	Full name of contributor out-of-state PAC (ID#:_ Haley, Yarbrough Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$83.33
		Port Lavaca, TX 77979				
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 03/20/2025	Full name of contributor out-of-state PAC (ID#:_ Harold, Bishop  Contributor address; City; State; Zip Code  Lufkin, TX 75904-6304			Amount of Contribution (\$)	\$83.33
	•	pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 03/24/2025	Full name of contributor out-of-state PAC (ID#:_ Hillary, Burkhardt Contributor address; City; State; Zip Code  Nederland, TX 77627			Amount of Contribution (\$)	\$30.00
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		

	MONEI	ONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instru	ction Guide explains how to co	mplete this fo	orm.	1	Total pages Schedule A1: Sch: 11/30 Rpt: 14/39			
2	FILER NAME	iation of Nurse Anesthetists Political	Action Commit	too	3	Filer ID (Ethics Commission 00069305	n Filers)		
_				,	_				
4	Date 03/13/2025	<ul> <li>Full name of contributor out- Holly, Pham</li> <li>Contributor address; City; State; Zip</li> </ul>	of-state PAC (ID#:_  Code		 	Amount of Contribution (\$)	\$100.00		
•	Dringing Local	Temple, TX 76502		Employer /See Instructions					
8		pation / Job title (See Instructions) pistered Nurse Anesthetist		9 Employer (See Instructions	5)				
					_				
	Date 02/28/2025	Full name of contributor out- Hylda, Nugent  Contributor address; City; State; Zip	of-state PAC (ID#:_  Code			Amount of Contribution (\$)	\$83.33		
		Weatherford, TX 76087-3820							
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)				
	Certified Registered Nurse Anesthetist								
	Date 03/21/2025	Full name of contributor out- Jacob, Rao  Contributor address; City; State; Zip	of-state PAC (ID#:_			Amount of Contribution (\$)	\$10.00		
	Drive in all and	Dallas, TX 75238	1	Fundamental Construction					
		pation / Job title (See Instructions) histered Nurse Anesthetist		Employer (See Instructions	5)				
	Date 03/20/2025	Full name of contributor out- Jane, Laidlaw  Contributor address; City; State; Zip  Dallas, TX 75214	of-state PAC (ID#:_ Code			Amount of Contribution (\$)	\$83.33		
	•	pation / Job title (See Instructions)		Employer (See Instructions	<u>.                                    </u>				
	Certified Reg	istered Nurse Anesthetist							
	Date 02/26/2025	Jared, Martinez	of-state PAC (ID#:_			Amount of Contribution (\$)	\$62.50		
		Contributor address; City; State; Zip  Beaumont, TX 77705	Code						
		pation / Job title (See Instructions) gistered Nurse Anesthetist		Employer (See Instructions	5)				

	MONET	ARY POLITICAL CONTRIBU	TION	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete th	his for	m.	1	Total pages Schedule A1: Sch: 12/30 Rpt: 15/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Political Action Co	mmitte	e	3	Filer ID (Ethics Commission 00069305	n Filers)
4	Date 03/06/2025	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$83.33
_		Kileen, TX 76544					
8		pation / Job title (See Instructions) histered Nurse Anesthetist	9	Employer (See Instructions	5)		
	Date 03/18/2025	Full name of contributor out-of-state PAC Jennifer, Andersen Contributor address; City; State; Zip Code Midland, TX 79705		)		Amount of Contribution (\$)	\$41.67
	•	pation / Job title (See Instructions) sistered Nurse Anesthetist		Employer (See Instructions	<u> </u>		
	Date 02/28/2025	Full name of contributor out-of-state PAC Jennifer, Anthony  Contributor address; City; State; Zip Code	(ID#:			Amount of Contribution (\$)	\$83.33
	Principal occu	Texarkana, TX 75501 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
		istered Nurse Anesthetist		, ., . (	_		
	Date 02/27/2025	Full name of contributor out-of-state PAC Jennifer, Jares  Contributor address; City; State; Zip Code  San Antonio, TX 78251		)		Amount of Contribution (\$)	\$360.00
	•	oation / Job title (See Instructions) pistered Nurse Anesthetist		Employer (See Instructions	5)		
	Date 03/20/2025	Full name of contributor out-of-state PAC Jennifer, Leuellen Contributor address; City; State; Zip Code Manvel, TX 77578		)		Amount of Contribution (\$)	\$41.67
		pation / Job title (See Instructions) pistered Nurse Anesthetist		Employer (See Instructions	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 13/30 Rpt: 16/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Political Action Committ	ee	3	Filer ID (Ethics Commission 00069305	Filers)
4	Date 02/27/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$25.00
0	Dringing occur	Fort Worth, TX 76110	• Employer (See Instructions			
0		pation / Job title (See Instructions) pistered Nurse Anesthetist	9 Employer (See Instructions	)		
	Date 02/28/2025	Full name of contributor out-of-state PAC (ID#: Jessica, Green  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$83.33
		BULLARD, TX 75757				
		pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 02/27/2025	Full name of contributor out-of-state PAC (ID#:  Jessica, Michinock  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$20.00
		Round Rock, TX 78664				
		pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 03/05/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$83.33
		pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 03/21/2025	Full name of contributor out-of-state PAC (ID#:_ Jessica, Zacek  Contributor address; City; State; Zip Code  Houston, TX 77024	)		Amount of Contribution (\$)	\$30.00
		pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	)		_

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 14/30 Rpt: 17/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Political Action Commit	tee	3	Filer ID (Ethics Commission 00069305	n Filers)
4	Date 03/20/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$25.00
_		Sherman, TX 75090				
8		pation / Job title (See Instructions) gistered Nurse Anesthetist	9 Employer (See Instructions	)		
	Date 03/18/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00
	Principal occu	Fort Worth, TX 76179 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Certified Reg	gistered Nurse Anesthetist				
	Date 02/27/2025	Full name of contributor			Amount of Contribution (\$)	\$83.33
		League City, TX 77573				
	•	pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 02/27/2025	Full name of contributor out-of-state PAC (ID#:_ Jose, Corpus Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		Perrysburg, OH 43551				
	•	pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 03/05/2025	Full name of contributor out-of-state PAC (ID#:_ Joseph, Mueller Contributor address; City; State; Zip Code  Austin, TX 78736	)		Amount of Contribution (\$)	\$100.00
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBU	JTIOI	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete	this fo	rm.	1	Total pages Schedule A1: Sch: 15/30 Rpt: 18/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Political Action C	Committe	ee	3	Filer ID (Ethics Commission 00069305	n Filers)
4	Date 03/01/2025	<ul> <li>Full name of contributor  out-of-state PA Joseph, Rodrigeuez</li> <li>Contributor address; City; State; Zip Code</li> </ul>	,	)	7	Amount of Contribution (\$)	\$30.00
_	Deinainal assu	Phoenix, AZ 85013-3635	10	. Faralayar (Con Instructions	<u></u>		
8		pation / Job title (See Instructions) istered Nurse Anesthetist	٩	Employer (See Instructions	5)		
	Date 02/28/2025	Full name of contributor out-of-state PA Kari A, Elliott  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$41.67
	Deinainal assu	Bullard, TX 75757	<del>- 1</del>	Faralous (Coo lostrustions	<u></u>		
		pation / Job title (See Instructions) istered Nurse Anesthetist		Employer (See Instructions	5)		
	Date 02/28/2025	Full name of contributor out-of-state PA Karrie, Rutherford Contributor address; City; State; Zip Code	AC (ID#:	)		Amount of Contribution (\$)	\$20.00
		Caldwell, TX 77836					
		oation / Job title (See Instructions) istered Nurse Anesthetist		Employer (See Instructions	s)		
	Date 02/26/2025	Full name of contributor out-of-state PA Kathryn, Kakenmaster Contributor address; City; State; Zip Code Keller, TX 76248		)		Amount of Contribution (\$)	\$83.33
		pation / Job title (See Instructions) istered Nurse Anesthetist		Employer (See Instructions	5)		
	Date 02/26/2025	Full name of contributor out-of-state PA Kay, Sanders  Contributor address; City; State; Zip Code  Fort Worth, TX 76179				Amount of Contribution (\$)	\$100.00
		oation / Job title (See Instructions) istered Nurse Anesthetist		Employer (See Instructions	5)		
			1				

	MONET	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/30 Rpt: 19/39			
2	FILER NAME Texas Assoc	ciation of Nurse Anesthetists Political Action Commit	tee	3	Filer ID (Ethics Commission 00069305	n Filers)		
4	Date 03/20/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$62.50		
_	Deignaignal annu	Victoria, TX 77904	O Franks on (Cas Instructions					
8		pation / Job title (See Instructions) gistered Nurse Anesthetist	9 Employer (See Instructions	)				
	Date 02/27/2025	Full name of contributor out-of-state PAC (ID#:_Kelly, Curbow  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
	Principal occu	Hideaway, TX 75771  pation / Job title (See Instructions)	Employer (See Instructions					
	Certified Registered Nurse Anesthetist			,				
	Date 03/10/2025	Full name of contributor out-of-state PAC (ID#:_ Kelsey, Albrecht Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$83.33		
		Houston, TX 77009						
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)				
	Date 03/21/2025	Full name of contributor out-of-state PAC (ID#:_Kenny, Corder  Contributor address; City; State; Zip Code  Abilene, TX 79606			Amount of Contribution (\$)	\$83.33		
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)				
	Date 03/25/2025	Full name of contributor out-of-state PAC (ID#:_Kenny, Corder  Contributor address; City; State; Zip Code  Abilene, TX 79606			Amount of Contribution (\$)	\$117.00		
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)				

	MONEI	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 17/30 Rpt: 20/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Po	olitical Action Commit	tee	3	Filer ID (Ethics Commission 00069305	Filers)
4	Date 03/21/2025	<ul><li>5 Full name of contributor [Kim, Morris</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	\$30.00
8		Crowley, TX 76036 pation / Job title (See Instructions)		9 Employer (See Instructions	<u> </u> 5)		
	Date 03/20/2025	Full name of contributor  Korde, Smith  Contributor address; City; Sta	out-of-state PAC (ID#:_ te; Zip Code			Amount of Contribution (\$)	\$50.00
		pation / Job title (See Instructions) gistered Nurse Anesthetist		Employer (See Instructions	<u>(</u>		
	Date 03/21/2025	Full name of contributor  Kristen, Booth  Contributor address; City; Sta	out-of-state PAC (ID#:_ te; Zip Code			Amount of Contribution (\$)	\$30.00
	Principal occu	Houston, TX 77027 pation / Job title (See Instructions)		Employer (See Instructions	  -  s)		
	Certified Reg	gistered Nurse Anesthetist					
	Date 02/27/2025	Full name of contributor [Lillian, Moya Contributor address; City; Sta Houston, TX 77025	out-of-state PAC (ID#:_ te; Zip Code	)		Amount of Contribution (\$)	\$62.50
	•	pation / Job title (See Instructions) gistered Nurse Anesthetist		Employer (See Instructions	5)		
	Date 03/17/2025	Full name of contributor Lillian, Resnick Contributor address; City; Sta	out-of-state PAC (ID#:_ te; Zip Code	)		Amount of Contribution (\$)	\$30.00
		pation / Job title (See Instructions) gistered Nurse Anesthetist		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 18/30 Rpt: 21/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Political Action Com	mittee	3	Filer ID (Ethics Commission 00069305	ı Filers)
4	Date 03/18/2025	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$41.67
_	Delicalization	Sugar Land, TX 77498	D. Frankrije (Co. hodenski	<u> </u>		
8		pation / Job title (See Instructions) pistered Nurse Anesthetist	9 Employer (See Instructions	5)		
	Date 03/22/2025	Full name of contributor out-of-state PAC (IE Lisa, Blacketter  Contributor address; City; State; Zip Code	) :	•	Amount of Contribution (\$)	\$30.00
	Principal occur	Port Lavaca, TX 77979 pation / Job title (See Instructions)	Employer (See Instructions	<u>=,</u>		
		istered Nurse Anesthetist	Employer (See instructions	٥)		
	Date 03/15/2025	Full name of contributor out-of-state PAC (IE Louise, Scudieri  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$62.50
		Decatur, TX 76234				
		pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	5)		
	Date 03/21/2025	Full name of contributor out-of-state PAC (IE Malaniy, Ilya  Contributor address; City; State; Zip Code  Plano, TX 75093	)		Amount of Contribution (\$)	\$30.00
		pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	5)		
	Date 03/18/2025	Full name of contributor out-of-state PAC (IEMalia, Stephenson  Contributor address; City; State; Zip Code  Keller, TX 76248	)#:)		Amount of Contribution (\$)	\$50.00
		pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/30 Rpt: 22/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Political Action Committ	ee	3	Filer ID (Ethics Commission 00069305	Filers)
4	Date 03/06/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$83.33
0	Dringing aggr	Houston, TX 77006	Employer (See Instructions	_		
0		pation / Job title (See Instructions) istered Nurse Anesthetist	9 Employer (See Instructions	')		
	Date 03/12/2025	Full name of contributor out-of-state PAC (ID#:_ Mark, Talon Contributor address; City; State; Zip Code  Bayou Vista, TX 77563			Amount of Contribution (\$)	\$83.33
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Certified Registered Nurse Anesthetist					
	Date 03/07/2025	Full name of contributor	)		Amount of Contribution (\$)	\$30.00
		Pearland, TX 77584				
		oation / Job title (See Instructions) istered Nurse Anesthetist	Employer (See Instructions	i)		
	Date 02/28/2025	Full name of contributor out-of-state PAC (ID#:_ Mary Jo, Watts  Contributor address; City; State; Zip Code  New Braunfels, TX 78132			Amount of Contribution (\$)	\$83.33
		oation / Job title (See Instructions) istered Nurse Anesthetist	Employer (See Instructions	5)		
	Date 02/26/2025	Full name of contributor out-of-state PAC (ID#:_ Masson, Farmer  Contributor address; City; State; Zip Code  Kemp, TX 75143	)		Amount of Contribution (\$)	\$83.33
		oation / Job title (See Instructions) istered Nurse Anesthetist	Employer (See Instructions	)		
	25.364 1105					

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 20/30 Rpt: 23/39	
2	FILER NAME Texas Assoc	ciation of Nurse Anesthetists Political Action Commit	tee	3	Filer ID (Ethics Commission 00069305	ı Filers)
4	Date 03/11/2025	Full name of contributor	)	7	Amount of Contribution (\$)	\$40.00
0	Dringing oggu	Houston, TX 77008  pation / Job title (See Instructions)	0 Employer (See Instructions			
8		gistered Nurse Anesthetist	9 Employer (See Instructions	)		
	Date 03/07/2025	Full name of contributor			Amount of Contribution (\$)	\$30.00
	Principal occu	Bellaire, TX 77401  pation / Job title (See Instructions)	Employer (See Instructions	)		
		gistered Nurse Anesthetist				
	Date 02/27/2025	Full name of contributor out-of-state PAC (ID#:_ Melissa, Dominick Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$62.50
		Spring, TX 77379				
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 02/27/2025	Full name of contributor out-of-state PAC (ID#:_Melizza, Saenz  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$62.50
	•	Belton, TX 76513  spation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 03/21/2025	Full name of contributor out-of-state PAC (ID#:_ Meredith, Paloian Contributor address; City; State; Zip Code Katy, TX 77494			Amount of Contribution (\$)	\$30.00
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULI	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 21/30 Rpt: 24/39	
2	FILER NAME Texas Assoc	ciation of Nurse Anesthetists Political Action Commit	tee	3	Filer ID (Ethics Commission 00069305	ı Filers)
4	Date 03/16/2025	Full name of contributor	)	7	Amount of Contribution (\$)	\$30.00
8	Principal occu	League City, TX 77573  pation / Job title (See Instructions)	9 Employer (See Instructions			
		gistered Nurse Anesthetist	2 Employer (See Matractions	,		
	Date 02/27/2025	Full name of contributor out-of-state PAC (ID#:_Mica, Hawthorne  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00
	Principal occu	Richmond, TX 77406  pation / Job title (See Instructions)	Employer (See Instructions			
		gistered Nurse Anesthetist	Employer (See instructions	,		
	Date 03/22/2025	Full name of contributor out-of-state PAC (ID#: Micah, Walden Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$83.33
		Sulphur Springs, TX 75483				
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 03/15/2025	Full name of contributor out-of-state PAC (ID#:_Michael, Byars  Contributor address; City; State; Zip Code  HOUSTON, TX 77019			Amount of Contribution (\$)	\$83.33
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 03/21/2025	Full name of contributor out-of-state PAC (ID#:_Michael, Cooney  Contributor address; City; State; Zip Code  Keller, TX 76248	)		Amount of Contribution (\$)	\$30.00
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 22/30 Rpt: 25/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Political Action Commi	ittee	3	Filer ID (Ethics Commission 00069305	Filers)
4	Date 02/27/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$83.33
0	Dringing coou	Abernathy, TX 79311 pation / Job title (See Instructions)	Employer (See Instructions	<u></u>		
0		istered Nurse Anesthetist	9 Employer (See Instructions	·)		
	Date 03/21/2025	Full name of contributor out-of-state PAC (ID#: Michael, Ombongi  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$62.50
	Principal occu	McKinney, TX 75071  pation / Job title (See Instructions)	Employer (See Instructions	 s)		
	Certified Reg	istered Nurse Anesthetist				
	Date 02/26/2025	Full name of contributor out-of-state PAC (ID#: Nancy, Washington  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$83.33
		Houston, TX 77020				
		pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	5)		
	Date 02/28/2025	Full name of contributor out-of-state PAC (ID#: Peter, Okello Contributor address; City; State; Zip Code Lubbock, TX 79423	)		Amount of Contribution (\$)	\$50.00
		oation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	5)		
	Date 03/22/2025	Full name of contributor out-of-state PAC (ID#: Peter, Omoni  Contributor address; City; State; Zip Code  Katy, TX 77494		•	Amount of Contribution (\$)	\$83.33
		oation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	5)		
			1			

	MONET	ARY POLITICAL CONTRIBU	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 23/30 Rpt: 26/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Political Action Cor	mmittee	3	Filer ID (Ethics Commission 00069305	n Filers)
4	Date 02/26/2025	Preston, Broadhead  6 Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$83.33
0	Dringing aggr	Texarkana, TX 75503	Employer (See Instruction			
8		pation / Job title (See Instructions) istered Nurse Anesthetist	9 Employer (See Instructions	S)		
	Date 02/28/2025	Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$83.34
	Houston, TX 77057  Principal occupation / Job title (See Instructions)  Employer (See Instructions					
	Certified Reg	istered Nurse Anesthetist				
	Date 03/06/2025				Amount of Contribution (\$)	\$50.00
		Austin, TX 78702				
		oation / Job title (See Instructions) istered Nurse Anesthetist	Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:)  03/20/2025 Rikysha, Smith  Contributor address; City; State; Zip Code  Spring, TX 77379				Amount of Contribution (\$)	\$30.00
		oation / Job title (See Instructions) istered Nurse Anesthetist	Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:)  03/22/2025 Robert, Moore  Contributor address; City; State; Zip Code  Fort Worth, TX 76116			Amount of Contribution (\$)	\$30.00	
		oation / Job title (See Instructions) istered Nurse Anesthetist	Employer (See Instructions	s)		
			1			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 24/30 Rpt: 27/39		
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Political Action Commi	ittee	3	Filer ID (Ethics Commission 00069305	on Filers)	
4	Date 03/04/2025	5 Full name of contributor			Amount of Contribution (\$)	\$83.33	
_		Texas, TX 76017	1				
8		pation / Job title (See Instructions) histered Nurse Anesthetist	9 Employer (See Instructions	5)			
	Date 03/20/2025				Amount of Contribution (\$)	\$83.33	
	Sugar Land, TX 77479  Principal occupation / Job title (See Instructions)  Certified Registered Nurse Anesthetist  Employer (See Instruction						
	Date 03/13/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
	•	Scurry, TX 75158  pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	<u> </u> ;)			
	Date Full name of contributor out-of-state PAC (ID#:)  03/21/2025 Robyn, Ward  Contributor address; City; State; Zip Code  Aledo, TX 76008				Amount of Contribution (\$)	\$83.33	
	•	pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	<u>(</u>			
	Date Full name of contributor out-of-state PAC (ID#:)  03/04/2025 Rodrick, Thomas  Contributor address; City; State; Zip Code  Livingston, TX 77399			Amount of Contribution (\$)	\$62.50		
		pation / Job title (See Instructions) pistered Nurse Anesthetist	Employer (See Instructions	5)			

	MONET	ARY POLITICAL CONTR	RIBUTION	NS		SCHEDULI	<b>■ A1</b>
	The Instruc	ction Guide explains how to comp	olete this for	·m.	1	Total pages Schedule A1: Sch: 25/30 Rpt: 28/39	
2	FILER NAME Texas Assoc	iation of Nurse Anesthetists Political Ac	tion Committe	e	3	Filer ID (Ethics Commission 00069305	ı Filers)
4	Date 03/07/2025				7	Amount of Contribution (\$)	\$30.00
0	Dringing agg	Houston, TX 77018	اما	Employer (See Instructions	·,		
0		pation / Job title (See Instructions) histered Nurse Anesthetist	9	Employer (See Instructions	)		
	Date 03/21/2025	ate Full name of contributor out-of-state PAC (ID#:)  Rylee, Apodaca  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$83.33
	Houston, TX 77004  Principal occupation / Job title (See Instructions)  Employer (See Instructions				<u>                                      </u>		
	Certified Reg	istered Nurse Anesthetist					
	Date 03/20/2025				Amount of Contribution (\$)	\$30.00	
		Austin, TX 78744					
	•	pation / Job title (See Instructions) pistered Nurse Anesthetist		Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  03/16/2025 Sara, Koerth  Contributor address; City; State; Zip Code  Nacogdoches, TX 75963				Amount of Contribution (\$)	\$20.00	
	•	oation / Job title (See Instructions) pistered Nurse Anesthetist		Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  02/28/2025 Sarah, Mueller  Contributor address; City; State; Zip Code  Inez, TX 77968			Amount of Contribution (\$)	\$30.00		
		pation / Job title (See Instructions) pistered Nurse Anesthetist		Employer (See Instructions	5)		
	Seranca rec	need ou realise / allestrictist					

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 26/30 Rpt: 29/39	
2	FILER NAME Texas Assoc	ME ssociation of Nurse Anesthetists Political Action Committee			Filer ID (Ethics Commission 00069305	n Filers)
4	Date 03/17/2025			7	Amount of Contribution (\$)	\$83.33
_	Duinning Langu	Salida, CO 81201	O Franks or (Cas Instructions			
8		pation / Job title (See Instructions) gistered Nurse Anesthetist	9 Employer (See Instructions	)		
	Date Full name of contributor out-of-state PAC (ID#:)  03/21/2025 Sean, Jastillano  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00
	Richardson, TX 75082  Principal occupation / Job title (See Instructions)  Employer (See Instruction					
	Certified Registered Nurse Anesthetist					
	Date Full name of contributor out-of-state PAC (ID#:)  02/28/2025 Sonia D, Estes  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00	
		Dallas, TX 75206				
	•	pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 03/20/2025	Full name of contributor out-of-state PAC (ID#:_ Stephen, Schaefer  Contributor address; City; State; Zip Code  New Braunfels, TX 78132			Amount of Contribution (\$)	\$30.00
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 03/22/2025	Full name of contributor out-of-state PAC (ID#:_ Steve, Frawley Contributor address; City; State; Zip Code Dallas, TX 75209			Amount of Contribution (\$)	\$83.33
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDULE A1	
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 27/30 Rpt: 30/39	
2	FILER NAME Texas Assoc	ciation of Nurse Anesthetists Political Action Com	mittee	3	Filer ID (Ethics Commission 00069305	n Filers)
4	Date 03/15/2025			7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Bayou Vista, TX 77563 pation / Job title (See Instructions)	9 Employer (See Instructions	<u>;)</u>		
•	•	gistered Nurse Anesthetist		-,		
	Date 03/15/2025	Full name of contributor out-of-state PAC (ID Stewart, Parnacott  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$83.33
		Houston, TX 77019		Ĺ		
	Principal occupation / Job title (See Instructions)  Certified Registered Nurse Anesthetist  Employer (See Instructions)					
	Date 03/21/2025	Full name of contributor out-of-state PAC (ID Sue, Kupper Contributor address; City; State; Zip Code Valley View, TX 76272	#:)		Amount of Contribution (\$)	\$100.00
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	<u>I</u> S)		
Date 03/01/2025		Full name of contributor out-of-state PAC (ID T'Anya, Carter Contributor address; City; State; Zip Code	) #:)		Amount of Contribution (\$)	\$83.33
	5	Dallas, TX 75235		<u></u>		
	•	pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	5)		
	Date 03/14/2025	Full name of contributor out-of-state PAC (ID Tammy, Moore  Contributor address; City; State; Zip Code  Houston, TX 77080	)#:)	•	Amount of Contribution (\$)	\$83.33
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	<u>(</u> 5)		

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDULE A1	
	The Instru	ction Guide explains how to complete th	his form.	1	Total pages Schedule A1: Sch: 28/30 Rpt: 31/39	
2	FILER NAME Texas Assoc	Deciation of Nurse Anesthetists Political Action Committee			Filer ID (Ethics Commission 00069305	n Filers)
4	Date 02/28/2025	02/28/2025 Tamra, Kelly  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$41.67
_	Dringing aggr	Humble, TX 77346	Employer (Coe Instruction	<u></u>		
8		pation / Job title (See Instructions) gistered Nurse Anesthetist	9 Employer (See Instructions	5)		
	Date 03/20/2025	Contributor address; City; State; Zip Code	(ID#:)	-	Amount of Contribution (\$)	\$30.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Certified Registered Nurse Anesthetist					
	Date 03/21/2025	Full name of contributor out-of-state PAC Tamra, Kelly Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$62.50
		Humble, TX 77346				
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	s)		
Date 03/20/2025		Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$62.50
	Principal occu	Burleson, TX 76028 pation / Job title (See Instructions)	Employer (See Instructions	 s)		
	•	gistered Nurse Anesthetist	, ., . (	-,		
	Date 02/28/2025	Full name of contributor out-of-state PAC Timothy, Morales Contributor address; City; State; Zip Code Missouri City, TX 77459	(ID#:)		Amount of Contribution (\$)	\$83.33
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	s)		
	22.234 1.00	,				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 29/30 Rpt: 32/39	
2	FILER NAME Texas Assoc	ciation of Nurse Anesthetists Political Action Commit	3	Filer ID (Ethics Commission 00069305	ı Filers)	
4	Date 03/20/2025	5 Full name of contributor out-of-state PAC (ID#:) Tina, Dores  6 Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$83.33
8	Principal occu	Laredo, TX 78045 pation / Job title (See Instructions)	Employer (See Instructions			
		Certified Registered Nurse Anesthetist		,		
	Date 03/20/2025	Full name of contributor out-of-state PAC (ID#:_ Trisha, Stroderd  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$30.00
	Deinsinal assu	Spring, TX 77389	Franks on (Cas Instructions			
	Principal occupation / Job title (See Instructions)  Certified Registered Nurse Anesthetist  Employer (See Instructions)					
	Date Full name of contributor out-of-state PAC (ID#:)  03/11/2025 Troy, Reed  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00	
		New Braunfels, TX 78132				
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		
	Date 03/10/2025	Full name of contributor out-of-state PAC (ID#:_ Tyler, Comans Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$41.67
	Principal occu	Fort Worth, TX 76179 pation / Job title (See Instructions)	Employer (See Instructions			
	•	gistered Nurse Anesthetist	Employer (See instructions	,		
	Date 03/21/2025	Full name of contributor out-of-state PAC (ID#:_ Vaughna, Galvin Contributor address; City; State; Zip Code Benbrook, TX 76126-4451	)		Amount of Contribution (\$)	\$83.33
		pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDUL	E <b>A1</b>		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 30/30 Rpt: 33/39	
2	FILER NAME Texas Assoc	ciation of Nurse Anesthetists Political Action Commit	tee	3	Filer ID (Ethics Commission 00069305	n Filers)
4	Date 03/11/2025  5 Full name of contributor  out-of-state PAC (ID#:) Veronica, Resendez  6 Contributor address; City; State; Zip Code			7	Amount of Contribution (\$)	\$30.00
_		Austin, TX 78757				
8		ncipal occupation / Job title (See Instructions)  prtified Registered Nurse Anesthetist  9 Employer (See Instructions)		5)		
	Date Full name of contributor out-of-state PAC (ID#:)  03/23/2025 Wendy, Odell  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$83.33	
	Southlake, TX 76092  Principal occupation / Job title (See Instructions)  Employer (See Instru					
		gistered Nurse Anesthetist	Employer (See Instructions	>)		
	Date 02/27/2025	Full name of contributor out-of-state PAC (ID#:_ Yvonne, Murphy  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Georgetown, TX 78633				
		upation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	5)		
	Date 03/19/2025	Full name of contributor out-of-state PAC (ID#:_ Yvonne V, Murphy  Contributor address; City; State; Zip Code  Georgetown, TX 78633	)	-	Amount of Contribution (\$)	\$50.00
	•	pation / Job title (See Instructions) gistered Nurse Anesthetist	Employer (See Instructions	<u>I</u> S)		

## MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

The Instru	ction Guide explains how to complete this form.	1 Total pages Schedule C3: Sch: 1/1 Rpt: 34/39
2 FILER NAME Texas Associ	ciation of Nurse Anesthetists Political Action Committee	3 Filer ID (Ethics Commission Filers) 00069305
4 Date	5 Corporation / Labor Organization name	6 Amount (\$)
03/01/2025	Texas Association of Nurse Anesthetists	416.00
Date 02/26/2025	Corporation / Labor Organization name Texas Association of Nurse Anesthetists	Amount (\$) 95.94

# NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C4

-						
	The Instru	ction Guide explains how to complete this form.	1	Total pages S	Schedule C4: ot: 35/39	
2	PILER NAME Texas Association of Nurse Anesthetists Political Action Committee				(Ethics Commission Filers)	
4	Date	5 Corporation / Labor Organization name	6	Amount (\$)		
L	02/28/2025	Texas Association of Nurse Anesthetists				400.00
Г	Date	Corporation / Labor Organization name		Amount (\$)		
	03/14/2025	Texas Association of Nurse Anesthetists			•	400.00

### 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

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)

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/3 Rpt: 36/39	Texas Association of Nurse Anesthetists Political Action 00069305
4 Date	5 Payee name
02/27/2025	Alaskarov, Nariman
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$10.00	12540 Terra Inca Dr
Expenditure from corporate funds	El Paso, TX 79938
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Refund Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Refund of monetary contribution.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
03/03/2025	American Express Merchant Services
Amount (\$)	Payee address; City; State; Zip Code
\$562.66	PO Box 53852
Expenditure from corporate funds	Phoenix, AZ 85072-3852
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Accounting/Banking  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Credit card processing of campaign contributions.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/27/2025	McLaughlin, Erin
Amount (\$)	Payee address; City; State; Zip Code
\$83.33	631 Prestwick Court
Φ03.33	031 Prestwick Court
Expenditure from	
corporate funds	Coppell, TX 75019
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Refund Check if travel outside of Texas. Complete Schedule T.
_//	Check if Austin, TX, officeholder living expense
	Refund of monetary contribution.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to beliefft C/OI	'

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

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

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

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

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain:		xpense Wages/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAM	ME			3	Filer ID (Ethics Commission File	rs)
	Sch: 2/3 Rpt: 37/39	Texas Ass	sociation of Nurse Anesthet	ists Politio	cal Action		00069305	
4	Date	5 Payee nam	ne			•		
	02/27/2025	Morningst	ar, Jason					
6	Amount (\$)	7 Payee addı	ress; City; Stat	e; Zip Co	ode			
	\$83.33	631 Prest	wick Court					
	Expenditure from corporate funds	Coppell, T	X 75019					
8	PURPOSE	(a) Category	(See Categories listed at the top of this se	chedule)	(b) Description			
	OF EXPENDITURE	Refund					de of Texas. Complete Schedule T.	
							officeholder living expense tary contribution.	
					T Column Of		an j commondern	
9	Complete ONLY if direct		fficeholder name	Office sou	<u>I</u> ught		Office held	
	expenditure to benefit C/OF	1 						
	Date	Payee nam	ne					
	02/27/2025	Moya, Lilli	an					
	Amount (\$)	Payee addı	ress; City; Stat	e; Zip Co	ode			
	\$62.50	3407 Knig	hton Hill Dr.					
_	T Evnanditura from							
	Expenditure from corporate funds	Houston,	TX 77025					
	PURPOSE	(a) Category	(See Categories listed at the top of this so	chedule)	(b) Description			
	OF EXPENDITURE	Refund			. —		de of Texas. Complete Schedule T.	
							officeholder living expense tary contribution.	
					Totalia of		, continuation	
	Complete ONLY if direct expenditure to benefit C/Oh		fficeholder name	Office sou	<u>I</u> ught		Office held	
	Date	Payee nam	ne					
	02/27/2025	Nesmith, I	Michael					
	Amount (\$)	Payee addı	ress; City; Stat	e; Zip Co	ode			
	\$500.00	6811 Mist	ra Dr.					
	Expenditure from corporate funds	Pasadena	ı, TX 77505					
	PURPOSE	(a) Category	(See Categories listed at the top of this se	chedule)	(b) Description			
	OF EXPENDITURE	Refund					de of Texas. Complete Schedule T.	
							officeholder living expense tary contribution.	
							,	
	Complete ONLY if direct	Candidate/O	fficeholder name	Office sou	<u>I</u> ıght		Office held	
	expenditure to benefit C/OH	4						

### 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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Coi	mmittee	Gift/Awards/Memorials Legal Services The Instruction Gu			pense ages/Contract Labor	Travel Out of D OTHER (enter	istrict a category not listed above)
┰	Total pages Schedule F1:	2	EII ER NAMI		<u> </u>		<u> </u>	3 Filer ID	(Ethics Commission Filers)
	Sch: 3/3 Rpt: 38/39			ciation of Nurse	Anesthetis	ts Politic	al Action	00069305	(Lance Commission Files)
4	Date	5	Payee name	)					
	02/27/2025		Scarbo, Be	n					
6	Amount (\$)	7	Payee addre	ess; City;	State:	; Zip Co	le		
	\$83.33		631 Prestw	rick Court					
	Expenditure from corporate funds		Coppe, TX	75019					
8	PURPOSE	(a)	Category (S	See Categories listed at th	e top of this sch	edule)	(b) Description		
	OF EXPENDITURE	OF Refund Check if travel outside of Texas. Complete Schedule T.							
l	LXI LINDITORL					Check if Austin, TX, officeholder living expense			
l							Refund of mo	onetary contrib	ution.
L		L							
9	Complete ONLY if direct expenditure to benefit C/OI	Η	Candidate/Off	iceholder name	(	Office sou	ht	Office h	eld
l									
l									
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### INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 39/39 2 FILER NAME Filer ID (Ethics Commission Filers) Texas Association of Nurse Anesthetists Political Action Committee 00069305 8 Amount (\$) Date Name of person from whom amount is received 02/28/2025 University Federal Credit Union \$0.45 6 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78704 Purpose for which amount is received Check if political contribution returned to filer Interest Amount (\$) Name of person from whom amount is received Date 02/28/2025 University Federal Credit Union \$0.02 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78704 Purpose for which amount is received Check if political contribution returned to filer Interest