

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00055955	2 Total pages filed: 253	
3 COMMITTEE NAME Libertarian Party of Texas			OFFICE USE ONLY	
			Date Received ELECTRONICALLY FILED 07/15/2025	
			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
			Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 1766 Austin, TX 78767			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Joe	MI MI	
	NICKNAME	LAST Burnes	SUFFIX	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 112 Brown Street Kingsland, TX 78639			
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 1241 Kingsland, TX 78639			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 755-2090			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff			
10 PERIOD COVERED	Month Day Year Month Day Year 01/01/2025 THROUGH 06/30/2025			
11 ELECTION	ELECTION DATE Month Day Year 05/03/2025		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Libertarian Party of Texas	13 Filer ID (Ethics Commission Filers) 00055955
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 34,446.70
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 60,358.19
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 182,676.02
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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

Mr. Joe Burnes

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME Libertarian Party of Texas		18 Filer ID (Ethics Commission Filers) 00055955
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 34,446.70
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 60,358.19
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/152 Rpt: 4/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Geoff 6 Contributor address; City; State; Zip Code Arlington, TX 76013	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Geoff Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Geoff Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 02/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Geoff Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 03/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Geoff Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/152 Rpt: 5/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Geoff 6 Contributor address; City; State; Zip Code Arlington, TX 76013	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allsbrooks, Tomas Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Walmart Corporate
Date 05/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allsbrooks, Tomas Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Walmart Corporate
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allsbrooks, Tomas Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Walmart Corporate
Date 02/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allsbrooks, Tomas Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Walmart Corporate

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/152 Rpt: 6/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allsbrooks, Tomas <hr/> 6 Contributor address; City; State; Zip Code Mansfield, TX 76063	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Walmart Corporate
Date 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allsbrooks, Tomas <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Walmart Corporate
Date 01/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Altekari, Girish <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$103.00
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions) Self Employed
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Altekari, Girish <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$103.00
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions) Self Employed
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Altekari, Girish <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$103.00
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/152 Rpt: 7/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Altekar, Girish <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$103.00
8 Principal occupation / Job title (See Instructions) Business		9 Employer (See Instructions) Self Employed
Date 03/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Altekar, Girish <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$103.00
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions) Self
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Altekar, Girish <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$103.00
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions) Self Employed
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, Andrew <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, Andrew <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/152 Rpt: 8/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, Andrew 6 Contributor address; City; State; Zip Code Brenham, TX 77833	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, Andrew Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, Andrew Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, Andrew Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, Andrew Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/152 Rpt: 9/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, Andrew <hr/> 6 Contributor address; City; State; Zip Code Brenham, TX 77833	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 02/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, Andrew <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 02/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, Andrew <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 03/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, Andrew <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, Andrew <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/152 Rpt: 10/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, Andrew <hr/> 6 Contributor address; City; State; Zip Code Brenham, TX 77833	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, Andrew <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, John <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Director of Operations		Employer (See Instructions) Trees of Central Texas
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, John <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Director of Operations		Employer (See Instructions) Trees of Central Texas
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, John <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Director of Operations		Employer (See Instructions) Trees of Central Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/152 Rpt: 11/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, John <hr/> 6 Contributor address; City; State; Zip Code Brenham, TX 77833	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Director of Operations		9 Employer (See Instructions) Trees of Central Texas
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, John <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Director of Operations		Employer (See Instructions) Trees of Central Texas
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelang, John <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Director of Operations		Employer (See Instructions) Trees of Central Texas
Date 01/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appelbaum, Robert <hr/> Contributor address; City; State; Zip Code Onalaska, TX 77360	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 01/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appelbaum, Robert <hr/> Contributor address; City; State; Zip Code Onalaska, TX 77360	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/152 Rpt: 12/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appelbaum, Robert <hr/> 6 Contributor address; City; State; Zip Code Onalaska, TX 77360	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appelbaum, Robert <hr/> Contributor address; City; State; Zip Code Onalaska, TX 77360	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 02/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appelbaum, Robert <hr/> Contributor address; City; State; Zip Code Onalaska, TX 77360	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 03/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appelbaum, Robert <hr/> Contributor address; City; State; Zip Code Onalaska, TX 77360	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appelbaum, Robert <hr/> Contributor address; City; State; Zip Code Onalaska, TX 77360	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/152 Rpt: 13/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arp, Matthew 6 Contributor address; City; State; Zip Code Friendswood, TX 77546	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arp, Matthew Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arp, Matthew Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 02/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arp, Matthew Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 03/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arp, Matthew Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/152 Rpt: 14/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arp, Matthew 6 Contributor address; City; State; Zip Code Friendswood, TX 77546	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 01/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Randolph Contributor address; City; State; Zip Code Hideaway, TX 75771	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GIS		Employer (See Instructions) Express Employment
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Randolph Contributor address; City; State; Zip Code Hideaway, TX 75771	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GIS		Employer (See Instructions) Express Employment
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Randolph Contributor address; City; State; Zip Code Hideaway, TX 75771	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GIS		Employer (See Instructions) Express Employment
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Randolph Contributor address; City; State; Zip Code Hideaway, TX 75771	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GIS		Employer (See Instructions) Express Employment

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/152 Rpt: 15/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Randolph 6 Contributor address; City; State; Zip Code Hideaway, TX 75771	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) GIS		9 Employer (See Instructions) Express Employment
Date 04/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Randolph Contributor address; City; State; Zip Code Hideaway, TX 75771	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GIS		Employer (See Instructions) Express Employment
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barney, Susan Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INTERNET SALES MANAGER		Employer (See Instructions) TOP CASH PAWN
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barney, Susan Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INTERNET SALES MANAGER		Employer (See Instructions) TOP CASH PAWN
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barney, Susan Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) INTERNET SALES MANAGER		Employer (See Instructions) TOP CASH PAWN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/152 Rpt: 16/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beerwinkle, Marshall 6 Contributor address; City; State; Zip Code Dallas, TX 75218	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Retired
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beerwinkle, Marshall Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Retired
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beerwinkle, Marshall Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Retired
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beerwinkle, Marshall Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Retired
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beerwinkle, Marshall Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/152 Rpt: 17/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beerwinkle, Marshall 6 Contributor address; City; State; Zip Code Dallas, TX 75218	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Retired
Date 01/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behlen, Andrew Contributor address; City; State; Zip Code La Grange, TX 78945-6139	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Reporter		Employer (See Instructions) Fayette County Record
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behlen, Andrew Contributor address; City; State; Zip Code La Grange, TX 78945-6139	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Reporter		Employer (See Instructions) Fayette County Record
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behlen, Andrew Contributor address; City; State; Zip Code La Grange, TX 78945-6139	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Reporter		Employer (See Instructions) Fayette County Record
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behlen, Andrew Contributor address; City; State; Zip Code La Grange, TX 78945-6139	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Reporter		Employer (See Instructions) Fayette County Record

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/152 Rpt: 18/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behlen, Andrew <hr/> 6 Contributor address; City; State; Zip Code La Grange, TX 78945-6139	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Reporter		9 Employer (See Instructions) Fayette County Record
Date 04/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behlen, Andrew <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945-6139	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Reporter		Employer (See Instructions) Fayette County Record
Date 04/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bender, Krystle <hr/> Contributor address; City; State; Zip Code Rosenberg, TX 77471	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Lamar Consolidated ISD
Date 01/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benedict, Wes <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) political consultant		Employer (See Instructions) Self Employed
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benedict, Wes <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) political consultant		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/152 Rpt: 19/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benedict, Wes <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78717	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) political consultant		9 Employer (See Instructions) Self Employed
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benedict, Wes <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) political consultant		Employer (See Instructions) Self Employed
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benedict, Wes <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) political consultant		Employer (See Instructions) Self Employed
Date 04/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benedict, Wes <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) political consultant		Employer (See Instructions) Self Employed
Date 04/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bereiter, Leslie <hr/> Contributor address; City; State; Zip Code Houston, TX 77095	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Naturopathic Doctor		Employer (See Instructions) The Brighter Life

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/152 Rpt: 20/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berger, Stephen 6 Contributor address; City; State; Zip Code Hutto, TX 78634	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) IT Manager		9 Employer (See Instructions) Aviat Networks
Date 05/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berger, Stephen Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) Aviat Networks
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berger, Stephen Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) Aviat Networks
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berger, Stephen Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) Aviat Networks
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berger, Stephen Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) Aviat Networks

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/152 Rpt: 21/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berger, Stephen 6 Contributor address; City; State; Zip Code Hutto, TX 78634	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) IT Manager		9 Employer (See Instructions) Aviat Networks
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birr, Ronda Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Attempted
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birr, Ronda Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Attempted
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birr, Ronda Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Attempted
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birr, Ronda Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/152 Rpt: 22/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birr, Ronda <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Attempted
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birr, Ronda <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Attempted
Date 04/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bjornstad, Ronald <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020-4079	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bjornstad, Ronald <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020-4079	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 01/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bledsoe, Daniel <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76180	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Rudy's BBQ

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/152 Rpt: 23/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bledsoe, Daniel 6 Contributor address; City; State; Zip Code North Richland Hills, TX 76180	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Rudy's BBQ
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bledsoe, Daniel Contributor address; City; State; Zip Code North Richland Hills, TX 76180	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Rudy's BBQ
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bledsoe, Daniel Contributor address; City; State; Zip Code North Richland Hills, TX 76180	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Rudy's BBQ
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bledsoe, Daniel Contributor address; City; State; Zip Code North Richland Hills, TX 76180	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Rudy's BBQ
Date 04/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bledsoe, Daniel Contributor address; City; State; Zip Code North Richland Hills, TX 76180	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Rudy's BBQ

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/152 Rpt: 24/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolin, Brandon 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$183.60
8 Principal occupation / Job title (See Instructions) Attorney / Real Estate Investor & Developer		9 Employer (See Instructions) Self Employed
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brashear, Nicky Contributor address; City; State; Zip Code Raymondville, TX 78580	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Loan Admin		Employer (See Instructions) Texas Farm Credit
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brashear, Nicky Contributor address; City; State; Zip Code Raymondville, TX 78580	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Loan Admin		Employer (See Instructions) Texas Farm Credit
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brashear, Nicky Contributor address; City; State; Zip Code Raymondville, TX 78580	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Loan Admin		Employer (See Instructions) Texas Farm Credit
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brashear, Nicky Contributor address; City; State; Zip Code Raymondville, TX 78580	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Loan Admin		Employer (See Instructions) Texas Farm Credit

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/152 Rpt: 25/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brashear, Nicky 6 Contributor address; City; State; Zip Code Raymondville, TX 78580	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Loan Admin		9 Employer (See Instructions) Texas Farm Credit
Date 03/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brashear, Nicky Contributor address; City; State; Zip Code Raymondville, TX 78580	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Loan Admin		Employer (See Instructions) Texas Farm Credit
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brashear, Nicky Contributor address; City; State; Zip Code Raymondville, TX 78580	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Loan Admin		Employer (See Instructions) Texas Farm Credit
Date 01/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brians, Wallace Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brians, Wallace Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/152 Rpt: 26/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brians, Wallace 6 Contributor address; City; State; Zip Code Southlake, TX 76092	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brians, Wallace Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brians, Wallace Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brians, Wallace Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadfoot, Robert Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/152 Rpt: 27/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Ted 6 Contributor address; City; State; Zip Code Austin, TX 78728	7 Amount of Contribution (\$) \$26.06
8 Principal occupation / Job title (See Instructions) Insurance Claims Adjuster		9 Employer (See Instructions) Self Employed
Date 03/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Ted Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Insurance Claims Adjuster		Employer (See Instructions) Self Employed
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Ted Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Insurance Claims Adjuster		Employer (See Instructions) Self Employed
Date 01/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Theodore Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Claims Adjuster		Employer (See Instructions) Self Employed
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Theodore Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Insurance Claims Adjuster		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/152 Rpt: 28/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Theodore <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78728	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Insurance Claims Adjuster		9 Employer (See Instructions) Self Employed
Date 05/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Theodore <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Insurance Claims Adjuster		Employer (See Instructions) Self Employed
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Theodore <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Insurance Claims Adjuster		Employer (See Instructions) Self
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnes, Joe <hr/> Contributor address; City; State; Zip Code Kingsland, TX 78639	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Insurance adjuster		Employer (See Instructions) Self Employed
Date 01/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Mike <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/152 Rpt: 29/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Mike 6 Contributor address; City; State; Zip Code Seguin, TX 78155	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Mike Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 02/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Mike Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Mike Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Mike Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/152 Rpt: 30/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Tara 6 Contributor address; City; State; Zip Code San Jacinto, CA 92582	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Tara Contributor address; City; State; Zip Code San Jacinto, CA 92582	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Tara Contributor address; City; State; Zip Code San Jacinto, CA 92582	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Tara Contributor address; City; State; Zip Code San Jacinto, CA 92582	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Tara Contributor address; City; State; Zip Code San Jacinto, CA 92582	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/152 Rpt: 31/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Tara <hr/> 6 Contributor address; City; State; Zip Code San Jacinto, CA 92582	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlin, Edward <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Training and Content Specialist		Employer (See Instructions) Jungle Scout
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlin, Edward <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Training and Content Specialist		Employer (See Instructions) Jungle Scout
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlin, Edward <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Training and Content Specialist		Employer (See Instructions) Jungle Scout
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlin, Edward <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Training and Content Specialist		Employer (See Instructions) Jungle Scout

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/152 Rpt: 32/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlin, Edward <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78729	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Training and Content Specialist		9 Employer (See Instructions) Jungle Scout
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlin, Edward <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Training and Content Specialist		Employer (See Instructions) Jungle Scout
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Payton <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Account Executive		Employer (See Instructions) Salem Media
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Manuel <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78408	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Attempted
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Manuel <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78408	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/152 Rpt: 33/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Manuel 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78408	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Attempted
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Manuel Contributor address; City; State; Zip Code Corpus Christi, TX 78408	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Attempted
Date 03/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Manuel Contributor address; City; State; Zip Code Corpus Christi, TX 78408	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Attempted
Date 04/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Manuel Contributor address; City; State; Zip Code Corpus Christi, TX 78408	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Attempted
Date 01/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaffee, David Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) DJ&M, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/152 Rpt: 34/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chastain, Michael <hr/> 6 Contributor address; City; State; Zip Code Dripping Springs, TX 78620	7 Amount of Contribution (\$) \$1,836.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 01/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Claytor, Chris <hr/> Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) T-Mobile
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Claytor, Chris <hr/> Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) T-Mobile
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Claytor, Chris <hr/> Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) T-Mobile
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Claytor, Chris <hr/> Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) T-Mobile

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/152 Rpt: 35/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Claytor, Chris 6 Contributor address; City; State; Zip Code Plano, TX 75024	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) IT Manager		9 Employer (See Instructions) T-Mobile
Date 04/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Claytor, Chris Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) T-Mobile
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collin County Libertarian Party Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Treasurer		Employer (See Instructions) Collin County LP
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Bill Contributor address; City; State; Zip Code El Paso, TX 19912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self Employed
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Bill Contributor address; City; State; Zip Code El Paso, TX 19912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/152 Rpt: 36/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Bill <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 19912	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Investor		9 Employer (See Instructions) Self
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Bill <hr/> Contributor address; City; State; Zip Code El Paso, TX 19912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self Employed
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Bill <hr/> Contributor address; City; State; Zip Code El Paso, TX 19912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Bill <hr/> Contributor address; City; State; Zip Code El Paso, TX 19912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self Employed
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colson, Luke <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/152 Rpt: 37/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colvin, Cory <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77040	7 Amount of Contribution (\$) \$26.06
8 Principal occupation / Job title (See Instructions) Musical Instrument Repair Technician		9 Employer (See Instructions) Fleming Musical Instruments and Repair
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conroy, Pat <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Attempted
Date 01/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Constant, David <hr/> Contributor address; City; State; Zip Code Orange, TX 77630	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 01/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Constant, David <hr/> Contributor address; City; State; Zip Code Orange, TX 77630-5046	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Constant, David <hr/> Contributor address; City; State; Zip Code Orange, TX 77630	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/152 Rpt: 38/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Constant, David 6 Contributor address; City; State; Zip Code Orange, TX 77630-5046	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Constant, David Contributor address; City; State; Zip Code Orange, TX 77630	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Constant, David Contributor address; City; State; Zip Code Orange, TX 77630-5046	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Constant, David Contributor address; City; State; Zip Code Orange, TX 77630	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Constant, David Contributor address; City; State; Zip Code Orange, TX 77630-5046	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/152 Rpt: 39/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Constant, David <hr/> 6 Contributor address; City; State; Zip Code Orange, TX 77630	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Constant, David <hr/> Contributor address; City; State; Zip Code Orange, TX 77630-5046	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 04/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Constant, David <hr/> Contributor address; City; State; Zip Code Orange, TX 77630	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 04/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Constant, David <hr/> Contributor address; City; State; Zip Code Orange, TX 77630-5046	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coogan, Mike <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/152 Rpt: 40/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coogan, Mike <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) Entrepreneur		9 Employer (See Instructions) Attempted
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coogan, Mike <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Attempted
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coogan, Mike <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Attempted
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coogan, Mike <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Attempted
Date 04/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coogan, Mike <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/152 Rpt: 41/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Philip <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75208	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Financial Reporting Manager		9 Employer (See Instructions) MJB Wood Group
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowart, Bobby <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SVP, HRIS Compensation		Employer (See Instructions) Woodforest National Bank
Date 01/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowart, Bobby <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SVP, HRIS Compensation		Employer (See Instructions) Woodforest National Bank
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowart, Bobby <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SVP, HRIS Compensation		Employer (See Instructions) Woodforest National Bank
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowart, Bobby <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SVP, HRIS Compensation		Employer (See Instructions) Woodforest National Bank

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/152 Rpt: 42/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowart, Bobby 6 Contributor address; City; State; Zip Code Conroe, TX 77385	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SVP, HRIS Compensation		9 Employer (See Instructions) Woodforest National Bank
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowart, Bobby Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SVP, HRIS Compensation		Employer (See Instructions) Woodforest National Bank
Date 04/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowart, Bobby Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SVP, HRIS Compensation		Employer (See Instructions) Woodforest National Bank
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowart, Jessi Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Eptura
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowart, Jessi Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Eptura

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/152 Rpt: 43/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowart, Jessi <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77385	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Eptura
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowart, Jessi <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Eptura
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowart, Jessi <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Eptura
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowart, Jessi <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Eptura
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crall, Doug <hr/> Contributor address; City; State; Zip Code Lumberton, TX 77657	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/152 Rpt: 44/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crall, Doug 6 Contributor address; City; State; Zip Code Lumberton, TX 77657	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Self Employed
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crall, Doug Contributor address; City; State; Zip Code Lumberton, TX 77657	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions) Self Employed
Date 02/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crall, Doug Contributor address; City; State; Zip Code Lumberton, TX 77657	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 03/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crall, Doug Contributor address; City; State; Zip Code Lumberton, TX 77657	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions) Self Employed
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crall, Doug Contributor address; City; State; Zip Code Lumberton, TX 77657	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/152 Rpt: 45/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darr, Paul 6 Contributor address; City; State; Zip Code San Antonio, TX 78254	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Systems Admin		9 Employer (See Instructions) English Language Center
Date 01/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darr, Paul Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Systems Admin		Employer (See Instructions) English Language Center
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darr, Paul Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Systems Admin		Employer (See Instructions) English Language Center
Date 02/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darr, Paul Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Systems Admin		Employer (See Instructions) English Language Center
Date 03/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darr, Paul Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Systems Administrator		Employer (See Instructions) English Language Center

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/152 Rpt: 46/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeLaughter, Jonethan <hr/> 6 Contributor address; City; State; Zip Code Argyle, TX 76226	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Healthcare		9 Employer (See Instructions) Self Employed
Date 05/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeLaughter, Jonethan <hr/> Contributor address; City; State; Zip Code Argyle, TX 76226	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) Self Employed
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeLaughter, Jonethan <hr/> Contributor address; City; State; Zip Code Argyle, TX 76226	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) Self
Date 02/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeLaughter, Jonethan <hr/> Contributor address; City; State; Zip Code Argyle, TX 76226	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) Self Employed
Date 03/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeLaughter, Jonethan <hr/> Contributor address; City; State; Zip Code Argyle, TX 76226	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/152 Rpt: 47/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeLaughter, Jonethan 6 Contributor address; City; State; Zip Code Argyle, TX 76226	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Healthcare		9 Employer (See Instructions) Self Employed
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Decker, Stephen Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) sale professional		Employer (See Instructions) Vector Marketing
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Decker, Stephen Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) sale professional		Employer (See Instructions) Vector Marketing
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Decker, Stephen Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) sale professional		Employer (See Instructions) Vector Marketing
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Decker, Stephen Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) sale professional		Employer (See Instructions) Vector Marketing

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/152 Rpt: 48/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Decker, Stephen <hr/> 6 Contributor address; City; State; Zip Code Allen, TX 75013	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) sale professional		9 Employer (See Instructions) Vector Marketing
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Decker, Stephen <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) sale professional		Employer (See Instructions) Vector Marketing
Date 01/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DiBianca, Kay <hr/> Contributor address; City; State; Zip Code Memphis, TN 38120	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self Employed
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dooling, Mike <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Information Security		Employer (See Instructions) Bank of America
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dooling, Mike <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Information Security		Employer (See Instructions) Bank of America

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/152 Rpt: 49/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dooling, Mike <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75006	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Information Security		9 Employer (See Instructions) Bank of America
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dooling, Mike <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Information Security		Employer (See Instructions) Bank of America
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dooling, Mike <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Information Security		Employer (See Instructions) Bank of America
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dooling, Mike <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Information Security		Employer (See Instructions) Bank of America
Date 04/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durant, Danielle <hr/> Contributor address; City; State; Zip Code Rockport, TX 78382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Healthcare Researcher		Employer (See Instructions) Westat

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/152 Rpt: 50/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engel, Diane <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78754	7 Amount of Contribution (\$) \$51.89
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engel, Diane <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Eligibility reviewer		Employer (See Instructions) Office of Attorney General
Date 04/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engel, Diane <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) pass		Employer (See Instructions) Eligibility Reviewer
Date 01/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Leonard <hr/> Contributor address; City; State; Zip Code Jarrell, TX 76537	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Leonard <hr/> Contributor address; City; State; Zip Code Jarrell, TX 76537	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/152 Rpt: 51/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Leonard <hr/> 6 Contributor address; City; State; Zip Code Jarrell, TX 76537	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 02/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Leonard <hr/> Contributor address; City; State; Zip Code Jarrell, TX 76537	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Leonard <hr/> Contributor address; City; State; Zip Code Jarrell, TX 76537	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Leonard <hr/> Contributor address; City; State; Zip Code Jarrell, TX 76537	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fanning, Carter <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78245	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Security Specialist		Employer (See Instructions) Department of the Air Force

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/152 Rpt: 52/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feagins, Kenneth <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75025	7 Amount of Contribution (\$) \$10.61
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) Boeing Inc
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feagins III, Kenneth <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$51.80
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Boeing, Inc
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feagins III, Kenneth <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$10.61
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Boeing, Inc
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feagins III, Kenneth <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$10.61
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Boeing, Inc
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feagins III, Kenneth <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Boeing, Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/152 Rpt: 53/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feagins III, Kenneth <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75025	7 Amount of Contribution (\$) \$10.61
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) Boeing Inc
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feagins III, Kenneth <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$10.61
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Boeing Inc
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figg, Alicia <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76182	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Backup Administrative Coordinator		Employer (See Instructions) Sprouts Farmers Market
Date 02/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figg, Alicia <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76182	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Backup Administrative Coordinator		Employer (See Instructions) Sprouts Farmers Market
Date 01/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fite, Sarah <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/152 Rpt: 54/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fite, Sarah <hr/> 6 Contributor address; City; State; Zip Code Weatherford, TX 76087	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) IT Consultant		9 Employer (See Instructions) Self Employed
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fite, Sarah <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) IHeartMedia
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fite, Sarah <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) Self Employed
Date 03/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fite, Sarah <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) Self Employed
Date 04/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fite, Sarah <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/152 Rpt: 55/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Benjamin <hr/> 6 Contributor address; City; State; Zip Code BAY CITY, TX 77414	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Cybersecurity Consultant		9 Employer (See Instructions) Self Employed
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Christy <hr/> Contributor address; City; State; Zip Code Humble, TX 77346	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Dyslexia Teacher		Employer (See Instructions) Humble ISD- Timbers ES
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Christy <hr/> Contributor address; City; State; Zip Code Humble, TX 77346	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Dyslexia Teacher		Employer (See Instructions) Humble ISD- Timbers ES
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Zachary <hr/> Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of Contribution (\$) \$58.69
Principal occupation / Job title (See Instructions) Management		Employer (See Instructions) World Champions Centre
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fredericks, Robert <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Houston Offshore Engineering

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/152 Rpt: 56/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fredericks, Robert 6 Contributor address; City; State; Zip Code Fulshear, TX 77441	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Houston Offshore Engineering
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fredericks, Robert Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Houston Offshore Engineering
Date 02/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fredericks, Robert Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Houston Offshore Engineering
Date 03/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fredericks, Robert Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Houston Offshore Engineering
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fredericks, Robert Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Houston Offshore Engineering

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/152 Rpt: 57/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallagher, Eric <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75035	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Recruiter		9 Employer (See Instructions) Jonathan Dayton & Associates
Date 01/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Sergio <hr/> Contributor address; City; State; Zip Code Houston, TX 77011	Amount of Contribution (\$) \$5.46
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Sergio <hr/> Contributor address; City; State; Zip Code Houston, TX 77011	Amount of Contribution (\$) \$5.46
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Sergio <hr/> Contributor address; City; State; Zip Code Houston, TX 77011	Amount of Contribution (\$) \$5.46
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 02/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Sergio <hr/> Contributor address; City; State; Zip Code Houston, TX 77011	Amount of Contribution (\$) \$5.46
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/152 Rpt: 58/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Sergio <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77011	7 Amount of Contribution (\$) \$5.46
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 04/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Sergio <hr/> Contributor address; City; State; Zip Code Houston, TX 77011	Amount of Contribution (\$) \$5.46
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 01/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Steven <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Steven <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Steven <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/152 Rpt: 59/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Steven <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78702	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Judith <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$420.00
Principal occupation / Job title (See Instructions) Retired Accountant		Employer (See Instructions) Retired
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Ian <hr/> Contributor address; City; State; Zip Code South Padre Island, TX 78597	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Pres.		Employer (See Instructions) Ian Griffin's Tennis Academy
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hale, Kevin <hr/> Contributor address; City; State; Zip Code Dallas, TX 75234	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant/ carpenter		Employer (See Instructions) Lptexas
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hale, Kevin <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Carpenter		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/152 Rpt: 60/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hale, Kevin 6 Contributor address; City; State; Zip Code Dallas, TX 75238	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Carpenter		9 Employer (See Instructions) Self Employed
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halleck, Mike Contributor address; City; State; Zip Code Huntsville, TX 77320	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sales Rep		Employer (See Instructions) Valero
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halleck, Mike Contributor address; City; State; Zip Code Huntsville, TX 77320	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sales Rep		Employer (See Instructions) Valero
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halleck, Mike Contributor address; City; State; Zip Code Huntsville, TX 77320	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sales Rep		Employer (See Instructions) Valero
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halleck, Mike Contributor address; City; State; Zip Code Huntsville, TX 77320	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sales Rep		Employer (See Instructions) Valero

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/152 Rpt: 61/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halleck, Mike 6 Contributor address; City; State; Zip Code Huntsville, TX 77320	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Sales Rep		9 Employer (See Instructions) Valero
Date 04/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halleck, Mike Contributor address; City; State; Zip Code Huntsville, TX 77320	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sales Rep		Employer (See Instructions) Valero
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Jacob Contributor address; City; State; Zip Code Webster, TX 77598	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) KBR
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Jacob Contributor address; City; State; Zip Code Webster, TX 77598	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) KBR
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Jacob Contributor address; City; State; Zip Code Webster, TX 77598	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) KBR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/152 Rpt: 62/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Jacob <hr/> 6 Contributor address; City; State; Zip Code Webster, TX 77598	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) KBR
Date 03/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Jacob <hr/> Contributor address; City; State; Zip Code Webster, TX 77598	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) KBR
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Jacob <hr/> Contributor address; City; State; Zip Code Webster, TX 77598	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) KBR
Date 01/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Tyler <hr/> Contributor address; City; State; Zip Code Gainesville, VA 20155	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Open Flank Strategies
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haseloff, Jr <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Contract Negotiator		Employer (See Instructions) USAA

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/152 Rpt: 63/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haseloff, Jr <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78261	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Contract Negotiator		9 Employer (See Instructions) USAA
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haseloff, Jr <hr/> Contributor address; City; State; Zip Code San antonio, TX 78261	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Contract Negotiator		Employer (See Instructions) USAA
Date 04/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haseloff, Jr <hr/> Contributor address; City; State; Zip Code San antonio, TX 78261	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Contract Negotiator		Employer (See Instructions) USAA
Date 04/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haseloff, Jr <hr/> Contributor address; City; State; Zip Code San antonio, TX 78261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Contract Negotiator		Employer (See Instructions) USAA
Date 01/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haseloff, Robert <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Contract Negotiator		Employer (See Instructions) USAA

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/152 Rpt: 64/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haseloff, Robert <hr/> 6 Contributor address; City; State; Zip Code San antonio, TX 78261	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Contract Negotiator		9 Employer (See Instructions) USAA
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haseloff, Robert <hr/> Contributor address; City; State; Zip Code San antonio, TX 78261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Contract Negotiator		Employer (See Instructions) USAA
Date 01/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haskett, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Blink Identity
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haskett, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Blink Identity
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haskett, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Blink Identity

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/152 Rpt: 65/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haskett, Mary <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Blink Identity
Date 03/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haskett, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Blink Identity
Date 04/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haskett, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Blink Identity
Date 01/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heflin, Jonathan <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77389	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heflin, Jonathan <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77389	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/152 Rpt: 66/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heflin, Jonathan 6 Contributor address; City; State; Zip Code The Woodlands, TX 77389	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 02/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heflin, Jonathan Contributor address; City; State; Zip Code The Woodlands, TX 77389	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heflin, Jonathan Contributor address; City; State; Zip Code The Woodlands, TX 77389	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 04/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heflin, Jonathan Contributor address; City; State; Zip Code The Woodlands, TX 77389	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 03/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heinonen, Robert Contributor address; City; State; Zip Code Blanco, TX 78606	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/152 Rpt: 67/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermann, Roger 6 Contributor address; City; State; Zip Code Austin, TX 78738	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) CISCO Systems
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermann, Roger Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CISCO Systems
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermann, Roger Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CISCO Systems
Date 02/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermann, Roger Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CISCO Systems
Date 03/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermann, Roger Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CISCO Systems

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/152 Rpt: 68/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermann, Roger 6 Contributor address; City; State; Zip Code Austin, TX 78738	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) CISCO Systems
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Himes, Jason Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Jacobs
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Himes, Jason Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Jacobs
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Himes, Jason Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Jacobs
Date 02/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Himes, Jason Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Jacobs

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/152 Rpt: 69/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Himes, Jason <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Jacobs
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Himes, Jason <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Jacobs
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hofferbert, Gavin <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78028	Amount of Contribution (\$) \$10.61
Principal occupation / Job title (See Instructions) Quality Inspector		Employer (See Instructions) Albany International
Date 01/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoogen, Austen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) TEK Systems
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoogen, Austen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) TEK Systems

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/152 Rpt: 70/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoogen, Austen <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) TEK Systems
Date 03/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoogen, Austen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) TEK Systems
Date 03/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoogen, Austen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) TEK Systems
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoogen, Austen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) TEK Systems
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulen, Alexander <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$31.69
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/152 Rpt: 71/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchinson, Kevin 6 Contributor address; City; State; Zip Code Tyler, TX 75703	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchinson, Kevin Contributor address; City; State; Zip Code Tyler, TX 75703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchinson, Kevin Contributor address; City; State; Zip Code Tyler, TX 75703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchinson, Kevin Contributor address; City; State; Zip Code Tyler, TX 75703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchinson, Kevin Contributor address; City; State; Zip Code Tyler, TX 75703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/152 Rpt: 72/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchinson, Kevin <hr/> 6 Contributor address; City; State; Zip Code Tyler, TX 75703	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 03/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Michael <hr/> Contributor address; City; State; Zip Code Houston, TX 77084	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EPC Scheduler		Employer (See Instructions) QISG
Date 02/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Charles <hr/> Contributor address; City; State; Zip Code Big Sandy, TX 75755	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karabats, Christopher <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Gemini
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karabats, Christopher <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Gemini

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/152 Rpt: 73/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karabats, Christopher <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) IT		9 Employer (See Instructions) Gemini
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karabats, Christopher <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Gemini
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karabats, Christopher <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Gemini
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karabats, Christopher <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Gemini
Date 01/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsey, William <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) pilot		Employer (See Instructions) Self Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/152 Rpt: 74/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsey, William 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) pilot		9 Employer (See Instructions) Self Employed
Date 03/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Lance Contributor address; City; State; Zip Code Bee Cave, TX 78738	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Lance Kennedy PLLC
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerby, Noah Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Fleet Service		Employer (See Instructions) American Airlines
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerby, Noah Contributor address; City; State; Zip Code Ft Worth, TX 76244	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Fleet Service		Employer (See Instructions) American Airlines
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerby, Noah Contributor address; City; State; Zip Code Ft Worth, TX 76244	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Fleet Service		Employer (See Instructions) American Airlines

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/152 Rpt: 75/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerby, Noah 6 Contributor address; City; State; Zip Code Ft Worth, TX 76244	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Fleet Service		9 Employer (See Instructions) American Airlines
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerby, Noah Contributor address; City; State; Zip Code Ft Worth, TX 76244	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Fleet Service		Employer (See Instructions) American Airlines
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerby, Noah Contributor address; City; State; Zip Code Ft Worth, TX 76244	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Fleet Service		Employer (See Instructions) American Airlines
Date 01/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kless, Ed Contributor address; City; State; Zip Code Allen, TX 75002-0960	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MetaConsultant		Employer (See Instructions) Self Employed
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kless, Ed Contributor address; City; State; Zip Code Allen, TX 75002-0960	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MetaConsultant		Employer (See Instructions) Self Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/152 Rpt: 76/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kless, Ed <hr/> 6 Contributor address; City; State; Zip Code Allen, TX 75002-0960	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) MetaConsultant		9 Employer (See Instructions) Self
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kless, Ed <hr/> Contributor address; City; State; Zip Code Allen, TX 75002-0960	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MetaConsultant		Employer (See Instructions) Self Employed
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kless, Ed <hr/> Contributor address; City; State; Zip Code Allen, TX 75002-0960	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MetaConsultant		Employer (See Instructions) Self
Date 04/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kless, Ed <hr/> Contributor address; City; State; Zip Code Allen, TX 75002-0960	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MetaConsultant		Employer (See Instructions) Self
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Warren <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154-1112	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Zeta Associates Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/152 Rpt: 77/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Warren <hr/> 6 Contributor address; City; State; Zip Code Schertz, TX 78154-1112	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Zeta Associates Inc.
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Warren <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154-1112	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Zeta Associates Inc.
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Warren <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154-1112	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Zeta Associates Inc.
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Warren <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154-1112	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Zeta Associates Inc.
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Warren <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154-1112	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Zeta Associates Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/152 Rpt: 78/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Karl <hr/> 6 Contributor address; City; State; Zip Code Leander, TX 78641	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Telescent
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Karl <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Telescent
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Karl <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Telescent
Date 02/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Karl <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Telescent
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Karl <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Telescent

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/152 Rpt: 79/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Karl 6 Contributor address; City; State; Zip Code Leander, TX 78641	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Telescent
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Nikki Contributor address; City; State; Zip Code Chatfield, TX 75105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Self Employed
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laurent, Thomas Contributor address; City; State; Zip Code Huntsville, TX 77320	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Attempted
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laurent, Thomas Contributor address; City; State; Zip Code Huntsville, TX 77320	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Attempted
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laurent, Thomas Contributor address; City; State; Zip Code Huntsville, TX 77320	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Attempted

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/152 Rpt: 80/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laurent, Thomas 6 Contributor address; City; State; Zip Code Huntsville, TX 77320	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) Attempted
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laurent, Thomas Contributor address; City; State; Zip Code Huntsville, TX 77320	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Attempted
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laurent, Thomas Contributor address; City; State; Zip Code Huntsville, TX 77320	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Attempted
Date 01/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leal, David Contributor address; City; State; Zip Code Edinburg, TX 78542	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Edinburg CISD
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leal, David Contributor address; City; State; Zip Code Edinburg, TX 78542	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Edinburg CISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/152 Rpt: 81/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leal, David <hr/> 6 Contributor address; City; State; Zip Code Edinburg, TX 78542	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Edinburg CISD
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leal, David <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78542	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Edinburg CISD
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leal, David <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78542	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Edinburg CISD
Date 04/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leal, David <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78542	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Edinburg CISD
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leckey, Eric <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales Manager		Employer (See Instructions) Favorite Brands

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/152 Rpt: 82/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litaker, Eric <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78233	7 Amount of Contribution (\$) \$26.06
8 Principal occupation / Job title (See Instructions) Line Cook		9 Employer (See Instructions) Silo
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loundy, Kristyna <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Frank <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ballesteros Gonzalez Law Firm
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Frank <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ballesteros Gonzalez Law Firm
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Frank <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ballesteros Gonzalez Law Firm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/152 Rpt: 83/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Frank <hr/> 6 Contributor address; City; State; Zip Code Harlingen, TX 78550	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Ballesteros Gonzalez Law Firm
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Frank <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ballesteros Gonzalez Law Firm
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Frank <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ballesteros Gonzalez Law Firm
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Frank <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ballesteros Gonzalez Law Firm
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maalona, John <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78221	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Asylum Officer		Employer (See Instructions) DHS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/152 Rpt: 84/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macdiarmid, Ian 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78255	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Office Manager		9 Employer (See Instructions) Bay Rock Operating
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahand, Clint Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Landman		Employer (See Instructions) Preston Ridge Oil
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahand, Clint Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Landman		Employer (See Instructions) Preston Ridge Oil
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahand, Clint Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Landman		Employer (See Instructions) Preston Ridge Oil
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahand, Clint Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Landman		Employer (See Instructions) Preston Ridge Oil

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/152 Rpt: 85/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahand, Clint <hr/> 6 Contributor address; City; State; Zip Code Rockwall, TX 75032	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Landman		9 Employer (See Instructions) Preston Ridge Oil
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahand, Clint <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Landman		Employer (See Instructions) Preston Ridge Oil
Date 04/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manthei, Nick <hr/> Contributor address; City; State; Zip Code Agawam, MA 01001	Amount of Contribution (\$) \$21.99
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Attempted
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marino, Dave <hr/> Contributor address; City; State; Zip Code El Paso, TX 79934	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marino, Dave <hr/> Contributor address; City; State; Zip Code El Paso, TX 79934	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/152 Rpt: 86/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marino, Dave <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79934	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marino, Dave <hr/> Contributor address; City; State; Zip Code El Paso, TX 79934	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marino, Dave <hr/> Contributor address; City; State; Zip Code El Paso, TX 79934	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marino, Dave <hr/> Contributor address; City; State; Zip Code El Paso, TX 79934	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martens, Kenny <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) software developer		Employer (See Instructions) Prudential Financial

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/152 Rpt: 87/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martens, Kenny <hr/> 6 Contributor address; City; State; Zip Code Grand Prairie, TX 75052	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) software developer		9 Employer (See Instructions) Prudential Financial
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martens, Kenny <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) software developer		Employer (See Instructions) Prudential Financial
Date 02/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martens, Kenny <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) software developer		Employer (See Instructions) Prudential Financial
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martens, Kenny <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) software developer		Employer (See Instructions) Prudential Financial
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martens, Kenny <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) software developer		Employer (See Instructions) Prudential Financial

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/152 Rpt: 88/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matte, Blaine 6 Contributor address; City; State; Zip Code Austin, TX 78729	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matte, Blaine Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matte, Blaine Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 02/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matte, Blaine Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matte, Blaine Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/152 Rpt: 89/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matte, Blaine <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78729	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 01/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauldin, Leslie <hr/> Contributor address; City; State; Zip Code Bryan, TX 77808	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Truck driver		Employer (See Instructions) Self Employed
Date 02/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauldin, Leslie <hr/> Contributor address; City; State; Zip Code Bryan, TX 77808	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Truck driver		Employer (See Instructions) Self Employed
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGee, Michael <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Auto Dealer		Employer (See Instructions) Mike McGee Motors Inc.
Date 01/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mikesell, Charles <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATC		Employer (See Instructions) FAA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/152 Rpt: 90/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ryan 6 Contributor address; City; State; Zip Code SHALLOWATER, TX 79363	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Hot Oil Unit Operator		9 Employer (See Instructions) On The Mark Energy Services
Date 05/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ryan Contributor address; City; State; Zip Code SHALLOWATER, TX 79363	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Hot Oil Unit Operator		Employer (See Instructions) On The Mark Energy Services
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ryan Contributor address; City; State; Zip Code SHALLOWATER, TX 79363	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Hot Oil Unit Operator		Employer (See Instructions) On The Mark Energy Services
Date 02/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ryan Contributor address; City; State; Zip Code SHALLOWATER, TX 79363	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Hot Oil Unit Operator		Employer (See Instructions) On The Mark Energy Services
Date 03/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ryan Contributor address; City; State; Zip Code SHALLOWATER, TX 79363	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Hot Oil Unit Operator		Employer (See Instructions) On The Mark Energy Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/152 Rpt: 91/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ryan <hr/> 6 Contributor address; City; State; Zip Code SHALLOWATER, TX 79363	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Hot Oil Unit Operator		9 Employer (See Instructions) On The Mark Energy Services
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mises Caucus of Texas <hr/> Contributor address; City; State; Zip Code Brookshire, TX 77423	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Patrick <hr/> Contributor address; City; State; Zip Code Victoria, TX 77904	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Helpdesk Supervisor		Employer (See Instructions) TISD, Inc
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Patrick <hr/> Contributor address; City; State; Zip Code Victoria, TX 77904	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Helpdesk Supervisor		Employer (See Instructions) TISD, Inc
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Patrick <hr/> Contributor address; City; State; Zip Code Victoria, TX 77904	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Tech Support		Employer (See Instructions) TISD, Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/152 Rpt: 92/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Patrick 6 Contributor address; City; State; Zip Code Victoria, TX 77904	7 Amount of Contribution (\$) \$26.06
8 Principal occupation / Job title (See Instructions) Helpdesk Supervisor		9 Employer (See Instructions) TISD, Inc
Date 03/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Patrick Contributor address; City; State; Zip Code Victoria, TX 77904	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Helpdesk Supervisor		Employer (See Instructions) TISD, Inc
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Patrick Contributor address; City; State; Zip Code Victoria, TX 77904	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Helpdesk Supervisor		Employer (See Instructions) TISD, Inc
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, Charlotte Contributor address; City; State; Zip Code San Antonio, TX 78227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Insurance Adjuster		Employer (See Instructions) Allstate
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, Charlotte Contributor address; City; State; Zip Code San Antonio, TX 78227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Insurance Adjuster		Employer (See Instructions) Allstate

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/152 Rpt: 93/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, Charlotte <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78227	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Insurance Adjuster		9 Employer (See Instructions) Allstate
Date 04/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, Charlotte <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Insurance Adjuster		Employer (See Instructions) Allstate
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, Clay <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Truck Driver		Employer (See Instructions) Broad Reach Express, LLC
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, Clay <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Truck Driver		Employer (See Instructions) Broad Reach Express, LLC
Date 03/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, Clay <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Truck Driver		Employer (See Instructions) Broad Reach Express, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/152 Rpt: 94/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, Clay <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78227	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Truck Driver		9 Employer (See Instructions) Broad Reach Express, LLC
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Ginny <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self Employed
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Ginny <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$5.46
Principal occupation / Job title (See Instructions) Bad ass assistant		Employer (See Instructions) Self Employed
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Ginny <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$28.19
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Self Employed
Date 01/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moses, Angelique <hr/> Contributor address; City; State; Zip Code Aledo, TX 76008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Attempted

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/152 Rpt: 95/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moses, Angelique <hr/> 6 Contributor address; City; State; Zip Code Aledo, TX 76008	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Attempted
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moses, Angelique <hr/> Contributor address; City; State; Zip Code Aledo, TX 76008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Attempted
Date 02/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moses, Angelique <hr/> Contributor address; City; State; Zip Code Aledo, TX 76008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Attempted
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moses, Angelique <hr/> Contributor address; City; State; Zip Code Aledo, TX 76008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Attempted
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moses, Angelique <hr/> Contributor address; City; State; Zip Code Aledo, TX 76008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Attempted

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/152 Rpt: 96/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munchmeyer, John <hr/> 6 Contributor address; City; State; Zip Code Celina, TX 75009	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Neuman Aluminium
Date 01/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Katie <hr/> Contributor address; City; State; Zip Code Bay City, TX 77414	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Palacios ISD
Date 02/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Katie <hr/> Contributor address; City; State; Zip Code Bay City, TX 77414	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Palacios ISD
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naaman, Jade <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$1,836.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Google
Date 03/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naaman, Jade <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Google

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/152 Rpt: 97/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolan, Gary <hr/> 6 Contributor address; City; State; Zip Code Sachse, TX 75048	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Talk Show Host		9 Employer (See Instructions) Zimmer Radio/Talk Media Network
Date 03/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noor, Malick <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019-6069	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Aira
Date 01/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Odhner, Roy <hr/> Contributor address; City; State; Zip Code Alvarado, TX 76009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Therapist for Veteran Mental Health Program		Employer (See Instructions) Pecan Valley Clinics
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Odhner, Roy <hr/> Contributor address; City; State; Zip Code Alvarado, TX 76009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Therapist for Veteran Mental Health Program		Employer (See Instructions) Pecan Valley Clinics
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Odhner, Roy <hr/> Contributor address; City; State; Zip Code Alvarado, TX 76009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Therapist for Veteran Mental Health Program		Employer (See Instructions) Pecan Valley Clinics

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/152 Rpt: 98/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Odhner, Roy <hr/> 6 Contributor address; City; State; Zip Code Alvarado, TX 76009	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Therapist for Veteran Mental Health Program		9 Employer (See Instructions) Pecan Valley Clinics
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Odhner, Roy <hr/> Contributor address; City; State; Zip Code Alvarado, TX 76009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Therapist for Veteran Mental Health Program		Employer (See Instructions) Pecan Valley Clinics
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Odhner, Roy <hr/> Contributor address; City; State; Zip Code Alvarado, TX 76009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Therapist for Veteran Mental Health Program		Employer (See Instructions) Pecan Valley Clinics
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Offe, Mathew <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse Anesthetist		Employer (See Instructions) Retired
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Offe, Mathew <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse Anesthetist		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/152 Rpt: 99/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Offe, Mathew <hr/> 6 Contributor address; City; State; Zip Code Fredericksburg, TX 78624	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Nurse Anesthetist		9 Employer (See Instructions) Retired
Date 04/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Offe, Mathew <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse Anesthetist		Employer (See Instructions) Retired
Date 04/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pagel, Ezra <hr/> Contributor address; City; State; Zip Code Austin, TX 78749-1651	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Software Architect		Employer (See Instructions) Brightwheel
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Mary <hr/> Contributor address; City; State; Zip Code Farmers Branch, TX 75234	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lifestyle Coach		Employer (See Instructions) Self Employed
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Mary <hr/> Contributor address; City; State; Zip Code Farmers Branch, TX 75234	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lifestyle Coach		Employer (See Instructions) Self Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/152 Rpt: 100/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Mary 6 Contributor address; City; State; Zip Code Farmers Branch, TX 75234	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Lifestyle Coach		9 Employer (See Instructions) Self Employed
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Mary Contributor address; City; State; Zip Code Farmers Branch, TX 75234	Amount of Contribution (\$) \$45.89
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Self Employed
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pantke, Jocelyn Contributor address; City; State; Zip Code Arlington, TX 76001	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 04/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patschke, Jonathan Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Treasurer		Employer (See Instructions) Libertarian Party of Travis County
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Otilio Contributor address; City; State; Zip Code Arlington, TX 76010	Amount of Contribution (\$) \$51.80
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) Self Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/152 Rpt: 101/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Otilio <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76010	7 Amount of Contribution (\$) \$51.80
8 Principal occupation / Job title (See Instructions) Mechanical Engineer		9 Employer (See Instructions) Self Employed
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Otilio <hr/> Contributor address; City; State; Zip Code Arlington, TX 76010	Amount of Contribution (\$) \$51.80
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) Self Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez Jr., Otilio Rene <hr/> Contributor address; City; State; Zip Code Arlington, TX 76010	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Mechanical Engineering		Employer (See Instructions) Self Employed
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez Jr., Rene <hr/> Contributor address; City; State; Zip Code Arlington, TX 76010	Amount of Contribution (\$) \$51.80
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) Self Employed
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez Jr., Rene <hr/> Contributor address; City; State; Zip Code Arlington, TX 76010	Amount of Contribution (\$) \$51.80
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) Self Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/152 Rpt: 102/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez Jr., Rene <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76010	7 Amount of Contribution (\$) \$51.80
8 Principal occupation / Job title (See Instructions) Mechanical Engineer		9 Employer (See Instructions) Self Employed
Date 02/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez Jr., Rene <hr/> Contributor address; City; State; Zip Code Arlington, TX 76010	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Mechanical Engineer		Employer (See Instructions) Self Employed
Date 01/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Richard <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Chem Logic
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Richard <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Chem Logic
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Richard <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Chem Logic

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/152 Rpt: 103/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Richard <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78737	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Chem Logic
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Richard <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Chem Logic
Date 04/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Richard <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Chem Logic
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Scott <hr/> Contributor address; City; State; Zip Code Rosenberg, TX 77471	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Customs Broker		Employer (See Instructions) Transmodal Corp
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Scott <hr/> Contributor address; City; State; Zip Code Rosenberg, TX 77471	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Customs Broker		Employer (See Instructions) Transmodal Corp

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/152 Rpt: 104/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Scott 6 Contributor address; City; State; Zip Code Rosenberg, TX 77471	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Customs Broker		9 Employer (See Instructions) Transmodal Corp
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Scott Contributor address; City; State; Zip Code Rosenberg, TX 77471	Amount of Contribution (\$) \$5.46
Principal occupation / Job title (See Instructions) Customs Broker		Employer (See Instructions) Transmodal Corp
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Scott Contributor address; City; State; Zip Code Rosenberg, TX 77471	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Customs Broker		Employer (See Instructions) Transmodal Corp
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Scott Contributor address; City; State; Zip Code Rosenberg, TX 77471	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Customs Broker		Employer (See Instructions) Transmodal Corp
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Scott Contributor address; City; State; Zip Code Rosenberg, TX 77471	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Customs Broker		Employer (See Instructions) Transmodal Corp

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/152 Rpt: 105/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pharr, Paige 6 Contributor address; City; State; Zip Code Cypress, TX 77433-6035	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) CFISD
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pharr, Paige Contributor address; City; State; Zip Code Cypress, TX 77433-6035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) CFISD
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pharr, Paige Contributor address; City; State; Zip Code Cypress, TX 77433-6035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) CFISD
Date 02/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pharr, Paige Contributor address; City; State; Zip Code Cypress, TX 77433-6035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) CFISD
Date 03/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pharr, Paige Contributor address; City; State; Zip Code Cypress, TX 77433-6035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) CFISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/152 Rpt: 106/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pharr, Paige 6 Contributor address; City; State; Zip Code Cypress, TX 77433-6035	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) CFISD
Date 02/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phipps, Nathan Contributor address; City; State; Zip Code Copperas Cove, TX 76522	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 01/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickering, Hank Contributor address; City; State; Zip Code Wolfe City, TX 75496-3372	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Controls Electrical Supervisor		Employer (See Instructions) The Henry Group
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickering, Hank Contributor address; City; State; Zip Code Wolfe City, TX 75496-3372	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Controls Electrical Supervisor		Employer (See Instructions) The Henry Group
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickering, Hank Contributor address; City; State; Zip Code Wolfe City, TX 75496-3372	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Controls Electrical Supervisor		Employer (See Instructions) The Henry Group

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/152 Rpt: 107/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickering, Hank 6 Contributor address; City; State; Zip Code Wolfe City, TX 75496-3372	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) department head/fabricator		9 Employer (See Instructions) THG/Self Employed
Date 03/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickering, Hank Contributor address; City; State; Zip Code Wolfe City, TX 75496-3372	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Controls Electrical Supervisor		Employer (See Instructions) The Henry Group
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickering, Hank Contributor address; City; State; Zip Code Wolfe City, TX 75496-3372	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Controls Electrical Supervisor		Employer (See Instructions) The Henry Group
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Billy Contributor address; City; State; Zip Code Houston, TX 77095	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Development Manager		Employer (See Instructions) Hawk Valve
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Billy Contributor address; City; State; Zip Code Houston, TX 77095	Amount of Contribution (\$) \$257.78
Principal occupation / Job title (See Instructions) Business Development Manager		Employer (See Instructions) Hawk Valve

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/152 Rpt: 108/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Billy 6 Contributor address; City; State; Zip Code Houston, TX 77095	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Business Development Manager		9 Employer (See Instructions) Hawk Valve
Date 01/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinon, Donna Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) White Ivy Real Estate
Date 05/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinon, Donna Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) White Ivy Real Estate
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinon, Donna Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) White Ivy Real Estate
Date 02/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinon, Donna Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) White Ivy Real Estate

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/152 Rpt: 109/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinon, Donna <hr/> 6 Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Broker		9 Employer (See Instructions) White Ivy Real Estate
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinon, Donna <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) White Ivy Real Estate
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pohler, Clint <hr/> Contributor address; City; State; Zip Code Horseshoe Bay, TX 78657	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Software engineer		Employer (See Instructions) Coupa Software
Date 03/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pohler, Clint <hr/> Contributor address; City; State; Zip Code Horseshoe Bay, TX 78657	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Coupa Software
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollok, Darren <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Operation		Employer (See Instructions) Aggreko

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/152 Rpt: 110/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollok, Darren <hr/> 6 Contributor address; City; State; Zip Code Seguin, TX 78155	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Operation		9 Employer (See Instructions) Aggreko
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollok, Darren <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Operation		Employer (See Instructions) Aggreko
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollok, Darren <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Operation		Employer (See Instructions) Aggreko
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollok, Darren <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Operation		Employer (See Instructions) Aggreko
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollok, Darren <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Operation		Employer (See Instructions) Aggreko

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/152 Rpt: 111/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollok, Darren <hr/> 6 Contributor address; City; State; Zip Code Seguin, TX 78155	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Operation		9 Employer (See Instructions) Aggreko
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polsky, Nathan <hr/> Contributor address; City; State; Zip Code Paris, TX 75460	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Enea
Date 02/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polsky, Nathan <hr/> Contributor address; City; State; Zip Code Paris, TX 75460	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Enea
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prather, Kate <hr/> Contributor address; City; State; Zip Code Mount Vernon, TX 75457	Amount of Contribution (\$) \$103.30
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions) LPTexas
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rangel, Jesse <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75165	Amount of Contribution (\$) \$58.14
Principal occupation / Job title (See Instructions) Senior Maintenance Engineer		Employer (See Instructions) Ocado Technology

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/152 Rpt: 112/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raven, Tim 6 Contributor address; City; State; Zip Code Ovilla, TX 75154-5534	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Journalist		9 Employer (See Instructions) retired
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravet, Steve Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$25.75
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Apple
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravet, Steve Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Apple
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravet, Steve Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Apple
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravet, Steve Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Apple

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/152 Rpt: 113/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravet, Steve 6 Contributor address; City; State; Zip Code Dripping Springs, TX 78620	7 Amount of Contribution (\$) \$25.75
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Apple
Date 02/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravet, Steve Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Apple
Date 03/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravet, Steve Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$25.75
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Apple
Date 03/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravet, Steve Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Apple
Date 04/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravet, Steve Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Apple

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/152 Rpt: 114/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravet, Steve 6 Contributor address; City; State; Zip Code Dripping Springs, TX 78620	7 Amount of Contribution (\$) \$25.75
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Apple
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richter, Byron Contributor address; City; State; Zip Code LEWISVILLE, TX 75077	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Event Production		Employer (See Instructions) Business Owner
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, James Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Attempted
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Joe Contributor address; City; State; Zip Code Dallas, TX 75228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Dallas College
Date 02/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Joe Contributor address; City; State; Zip Code Dallas, TX 75228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Dallas College

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/152 Rpt: 115/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Allison <hr/> 6 Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SOC Analyst II		9 Employer (See Instructions) DigitalOcean
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Allison <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOC Analyst II		Employer (See Instructions) DigitalOcean
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Allison <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOC Analyst II		Employer (See Instructions) DigitalOcean
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Allison <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOC Analyst II		Employer (See Instructions) DigitalOcean
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Allison <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOC Analyst II		Employer (See Instructions) DigitalOcean

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/152 Rpt: 116/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Allison <hr/> 6 Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SOC Analyst II		9 Employer (See Instructions) DigitalOcean
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross Deters, Donna <hr/> Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) stay at home mom		Employer (See Instructions) Not Employed
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheel, Richard <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Controller		Employer (See Instructions) Electric Reliability Council of Texas
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheel, Richard <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Controller		Employer (See Instructions) Electric Reliability Council of Texas
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheel, Richard <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Controller		Employer (See Instructions) Electric Reliability Council of Texas

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/152 Rpt: 117/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheel, Richard <hr/> 6 Contributor address; City; State; Zip Code Lexington, TX 78947	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Controller		9 Employer (See Instructions) Electric Reliability Council of Texas
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheel, Richard <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Controller		Employer (See Instructions) Electric Reliability Council of Texas
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheel, Richard <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Controller		Employer (See Instructions) Electric Reliability Council of Texas
Date 01/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Nolan <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Substitute Teacher		Employer (See Instructions) ESS
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Nolan <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Substitute Teacher		Employer (See Instructions) ESS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/152 Rpt: 118/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Nolan <hr/> 6 Contributor address; City; State; Zip Code Seguin, TX 78155	7 Amount of Contribution (\$) \$26.06
8 Principal occupation / Job title (See Instructions) Substitute Teacher		9 Employer (See Instructions) ESS
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Nolan <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Substitute Teacher		Employer (See Instructions) ESS
Date 03/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Nolan <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Substitute Teacher		Employer (See Instructions) ESS
Date 04/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Nolan <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Substitute Teacher		Employer (See Instructions) ESS
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seager, Christopher <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Tesla

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/152 Rpt: 119/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seeker, Dustin 6 Contributor address; City; State; Zip Code Midland, TX 79707	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Operations Manager		9 Employer (See Instructions) Triumph Drilling Services
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seeker, Dustin Contributor address; City; State; Zip Code Midland, TX 79707	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) Triumph Drilling Services
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seeker, Dustin Contributor address; City; State; Zip Code Midland, TX 79707	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) Triumph Drilling Services
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seeker, Dustin Contributor address; City; State; Zip Code Midland, TX 79707	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) Triumph Drilling Services
Date 03/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seeker, Dustin Contributor address; City; State; Zip Code Midland, TX 79707	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) Triumph Drilling Services

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/152 Rpt: 120/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seeker, Dustin <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79707	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Operations Manager		9 Employer (See Instructions) Triumph Drilling Services
Date 01/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleep, Neil <hr/> Contributor address; City; State; Zip Code Boerne, TX 78015	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) IT Professional		Employer (See Instructions) CHRISTUS Health
Date 01/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleep, Neil <hr/> Contributor address; City; State; Zip Code Boerne, TX 78015	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) IT Professional		Employer (See Instructions) CHRISTUS Health
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleep, Neil <hr/> Contributor address; City; State; Zip Code Boerne, TX 78015	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) IT Professional		Employer (See Instructions) CHRISTUS Health
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleep, Neil <hr/> Contributor address; City; State; Zip Code Boerne, TX 78015	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) IT Professional		Employer (See Instructions) CHRISTUS Health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/152 Rpt: 121/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleep, Neil 6 Contributor address; City; State; Zip Code Boerne, TX 78015	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) IT Professional		9 Employer (See Instructions) CHRISTUS Health
Date 02/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleep, Neil Contributor address; City; State; Zip Code Boerne, TX 78015	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) IT Professional		Employer (See Instructions) CHRISTUS Health
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleep, Neil Contributor address; City; State; Zip Code Boerne, TX 78015	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) IT Professional		Employer (See Instructions) CHRISTUS Health
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleep, Neil Contributor address; City; State; Zip Code Boerne, TX 78015	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) IT Professional		Employer (See Instructions) CHRISTUS Health
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleep, Neil Contributor address; City; State; Zip Code Boerne, TX 78015	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) IT Professional		Employer (See Instructions) CHRISTUS Health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/152 Rpt: 122/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sleep, Neil <hr/> 6 Contributor address; City; State; Zip Code Boerne, TX 78015	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) IT Professional		9 Employer (See Instructions) CHRISTUS Health
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Eli <hr/> Contributor address; City; State; Zip Code OMAHA, NE 68107	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) USAF
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Eli <hr/> Contributor address; City; State; Zip Code OMAHA, NE 68107	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) USAF
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Eli <hr/> Contributor address; City; State; Zip Code OMAHA, NE 68107	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) USAF
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Eli <hr/> Contributor address; City; State; Zip Code OMAHA, NE 68107	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) USAF

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2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Eli <hr/> 6 Contributor address; City; State; Zip Code OMAHA, NE 68107	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) USAF
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Eli <hr/> Contributor address; City; State; Zip Code OMAHA, NE 68107	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) USAF
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jerry <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) PCE Paragon Solutions USA Inc
Date 01/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobotik, Heidi <hr/> Contributor address; City; State; Zip Code Universal City, TX 78148	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) clinical herbalist		Employer (See Instructions) Self Employed
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobotik, Heidi <hr/> Contributor address; City; State; Zip Code Universal City, TX 78148	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) clinical herbalist		Employer (See Instructions) Self Employed

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4 Date 06/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobotik, Heidi <hr/> 6 Contributor address; City; State; Zip Code Universal City, TX 78148	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) clinical herbalist		9 Employer (See Instructions) self
Date 02/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobotik, Heidi <hr/> Contributor address; City; State; Zip Code Universal City, TX 78148	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) clinical herbalist		Employer (See Instructions) Self Employed
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobotik, Heidi <hr/> Contributor address; City; State; Zip Code Universal City, TX 78148	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) clinical herbalist		Employer (See Instructions) self
Date 04/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobotik, Heidi <hr/> Contributor address; City; State; Zip Code Universal City, TX 78148	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) clinical herbalist		Employer (See Instructions) Self Employed
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparkman, Anna <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75054	Amount of Contribution (\$) \$5.46
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Trinity Basin Preparatory

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/152 Rpt: 125/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparkman, Sean 6 Contributor address; City; State; Zip Code Grand Prairie, TX 75052-7560	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Solution Architect		9 Employer (See Instructions) Zeal IT Consultants
Date 01/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Britton Contributor address; City; State; Zip Code Chicago, IL 60618	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Meeting Planner		Employer (See Instructions) HelmsBriscoe ResourceOne
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Britton Contributor address; City; State; Zip Code Chicago, IL 60618	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Meeting Planner		Employer (See Instructions) HelmsBriscoe ResourceOne
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Britton Contributor address; City; State; Zip Code Chicago, IL 60618	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Meeting Planner		Employer (See Instructions) HelmsBriscoe ResourceOne
Date 02/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Britton Contributor address; City; State; Zip Code Chicago, IL 60618	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Meeting Planner		Employer (See Instructions) HelmsBriscoe ResourceOne

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Britton <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60618	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Meeting Planner		9 Employer (See Instructions) HelmsBriscoe ResourceOne
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Britton <hr/> Contributor address; City; State; Zip Code Chicago, IL 60618	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Meeting Planner		Employer (See Instructions) HelmsBriscoe ResourceOne
Date 05/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanko, Nicholas <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) NES Aviation Services
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Jim <hr/> Contributor address; City; State; Zip Code Marble Falls, TX 78654	Amount of Contribution (\$) \$104.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) Self Employed
Date 04/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stepney, Alfonzie <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/152 Rpt: 127/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stepney III, Alfonzie 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stepney III, Alfonzie Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stepney III, Alfonzie Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stepney III, Alfonzie Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stepney III, Alfonzie Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/152 Rpt: 128/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Thomas <hr/> 6 Contributor address; City; State; Zip Code Cleburne, TX 76031	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Shawn <hr/> Contributor address; City; State; Zip Code Azle, TX 76020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) TEKsystems
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talley, Scott <hr/> Contributor address; City; State; Zip Code Jarrell, TX 76537	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mechanic		Employer (See Instructions) Champion site prep
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talley, Scott <hr/> Contributor address; City; State; Zip Code Jarrell, TX 76537	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mechanic		Employer (See Instructions) Champion site prep
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talley, Scott <hr/> Contributor address; City; State; Zip Code Jarrell, TX 76537	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mechanic		Employer (See Instructions) Champion site prep

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SCHEDULE A1

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2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talley, Scott 6 Contributor address; City; State; Zip Code Jarrell, TX 76537	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Mechanic		9 Employer (See Instructions) Champion site prep
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talley, Scott Contributor address; City; State; Zip Code Jarrell, TX 76537	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mechanic		Employer (See Instructions) Champion site prep
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talley, Scott Contributor address; City; State; Zip Code Jarrell, TX 76537	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mechanic		Employer (See Instructions) Champion site prep
Date 01/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanner, Eric Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Conroe ISD
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanner, Eric Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Conroe ISD

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2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanner, Eric 6 Contributor address; City; State; Zip Code Spring, TX 77386	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Conroe ISD
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanner, Eric Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Conroe ISD
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanner, Eric Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Conroe ISD
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanner, Eric Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Conroe ISD
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Curry Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Texas Instruments

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/152 Rpt: 131/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Curry <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75044	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Texas Instruments
Date 03/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Curry <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Texas Instruments
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Curry <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Texas Instruments
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thornton, Daniel <hr/> Contributor address; City; State; Zip Code Corpus Chrisit, TX 78418	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) CCISD
Date 01/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tippetts, Mark <hr/> Contributor address; City; State; Zip Code Austin, TX 78732	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed

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4 Date 05/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tippetts, Mark 6 Contributor address; City; State; Zip Code Austin, TX 78732	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self Employed
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tippetts, Mark Contributor address; City; State; Zip Code Austin, TX 78732	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed
Date 02/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tippetts, Mark Contributor address; City; State; Zip Code Austin, TX 78732	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tippetts, Mark Contributor address; City; State; Zip Code Austin, TX 78732	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tippetts, Mark Contributor address; City; State; Zip Code Austin, TX 78732	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed

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2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tometczak, Jeremy 6 Contributor address; City; State; Zip Code San Antonio, TX 78245	7 Amount of Contribution (\$) \$5.46
8 Principal occupation / Job title (See Instructions) Retired Military		9 Employer (See Instructions) Attempted
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tometczak, Jeremy Contributor address; City; State; Zip Code San Antonio, TX 78245	Amount of Contribution (\$) \$5.46
Principal occupation / Job title (See Instructions) Retired Military		Employer (See Instructions) Attempted
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tometczak, Jeremy Contributor address; City; State; Zip Code San Antonio, TX 78245	Amount of Contribution (\$) \$5.46
Principal occupation / Job title (See Instructions) Retired Military		Employer (See Instructions) Attempted
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tometczak, Jeremy Contributor address; City; State; Zip Code San Antonio, TX 78245	Amount of Contribution (\$) \$5.46
Principal occupation / Job title (See Instructions) Retired Military		Employer (See Instructions) Attempted
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tometczak, Jeremy Contributor address; City; State; Zip Code San Antonio, TX 78245	Amount of Contribution (\$) \$5.46
Principal occupation / Job title (See Instructions) Retired Military		Employer (See Instructions) Attempted

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8 Principal occupation / Job title (See Instructions) Retired Military		9 Employer (See Instructions) Attempted
Date 01/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Bobie <hr/> Contributor address; City; State; Zip Code Crockett, TX 75835	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Self Employed
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Bobie <hr/> Contributor address; City; State; Zip Code Crockett, TX 75835	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Self Employed
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Bobie <hr/> Contributor address; City; State; Zip Code Crockett, TX 75835	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Self
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Bobie <hr/> Contributor address; City; State; Zip Code Crockett, TX 75835	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Self Employed

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4 Date 03/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Bobie <hr/> 6 Contributor address; City; State; Zip Code Crockett, TX 75835	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) Contractor		9 Employer (See Instructions) Self
Date 04/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Bobie <hr/> Contributor address; City; State; Zip Code Crockett, TX 75835	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Credit Card
Date 01/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Unsicker, Carol <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Maintenance Mechanic III		Employer (See Instructions) City of Houston
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Unsicker, Carol <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Maintenance Mechanic III		Employer (See Instructions) City of Houston
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Unsicker, Carol <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Maintenance Mechanic III		Employer (See Instructions) City of Houston

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 133/152 Rpt: 136/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Unsicker, Carol <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Maintenance Mechanic III		9 Employer (See Instructions) City of Houston
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Unsicker, Carol <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Maintenance Mechanic III		Employer (See Instructions) City of Houston
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Unsicker, Carol <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Maintenance Mechanic III		Employer (See Instructions) City of Houston
Date 01/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vandercook, Sean <hr/> Contributor address; City; State; Zip Code Aledo, TX 76008	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sergeant		Employer (See Instructions) Texas
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vandercook, Sean <hr/> Contributor address; City; State; Zip Code Aledo, TX 76008	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sergeant		Employer (See Instructions) Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/152 Rpt: 137/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Matthew 6 Contributor address; City; State; Zip Code Rockport, TX 78382	7 Amount of Contribution (\$) \$26.06
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Pinnacle
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Nathan Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Chemist		Employer (See Instructions) BASF
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Nathan Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Chemist		Employer (See Instructions) BASF
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Nathan Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Chemist		Employer (See Instructions) BASF
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Nathan Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Chemist		Employer (See Instructions) BASF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Nathan <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77079	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Chemist		9 Employer (See Instructions) BASF
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Nathan <hr/> Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Chemist		Employer (See Instructions) BASF
Date 01/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiland, Chris <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$10.61
Principal occupation / Job title (See Instructions) Group Creative Director		Employer (See Instructions) RKD Group
Date 05/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiland, Chris <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$10.61
Principal occupation / Job title (See Instructions) Group Creative Director		Employer (See Instructions) RKD Group
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiland, Chris <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$10.61
Principal occupation / Job title (See Instructions) Group Creative Director		Employer (See Instructions) RKD Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/152 Rpt: 139/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiland, Chris <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080	7 Amount of Contribution (\$) \$10.61
8 Principal occupation / Job title (See Instructions) Group Creative Director		9 Employer (See Instructions) RKD Group
Date 04/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiland, Chris <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$10.61
Principal occupation / Job title (See Instructions) Group Creative Director		Employer (See Instructions) RKD Group
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Cynthia <hr/> Contributor address; City; State; Zip Code Hearne, TX 77859	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Creative Solutions in Healthcare
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Cynthia <hr/> Contributor address; City; State; Zip Code Hearne, TX 77859	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Creative Solutions in Healthcare
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Cynthia <hr/> Contributor address; City; State; Zip Code Hearne, TX 77859	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Creative Solutions in Healthcare

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/152 Rpt: 140/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Hearne, TX 77859	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) Creative Solutions in Healthcare
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Cynthia <hr/> Contributor address; City; State; Zip Code Hearne, TX 77859	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Creative Solutions in Healthcare
Date 04/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Cynthia <hr/> Contributor address; City; State; Zip Code Hearne, TX 77859	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Creative Solutions in Healthcare
Date 02/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, D'Anne <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Attempted
Date 04/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, D'Anne <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606	Amount of Contribution (\$) \$103.30
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 138/152 Rpt: 141/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Kenneth 6 Contributor address; City; State; Zip Code Blanco, TX 78606	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired Civil Engineer		9 Employer (See Instructions) Attempted
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Jack Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Disabled
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Jack Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Disabled
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Jack Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Disabled
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Jack Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Disabled

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 139/152 Rpt: 142/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Jack 6 Contributor address; City; State; Zip Code Amarillo, TX 79109	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Disabled
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Jack Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Disabled
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Jack Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Disabled
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Jack Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$103.30
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Disabled
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Jack Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Political Activist		Employer (See Instructions) Disabled/Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 140/152 Rpt: 143/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Jack 6 Contributor address; City; State; Zip Code Amarillo, TX 79109	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Political Activist		9 Employer (See Instructions) Disabled/Retired
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Jack Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Political Activist		Employer (See Instructions) Disabled/Retired
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Jack Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Political Activist		Employer (See Instructions) Disabled/Retired
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Jack Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Political Activist		Employer (See Instructions) Disabled/Retired
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westbrook, Jack Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Political Activist		Employer (See Instructions) Disabled/Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 141/152 Rpt: 144/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wigington, Michael 6 Contributor address; City; State; Zip Code Wylie, TX 75098	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wigington, Michael Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wigington, Michael Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 02/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wigington, Michael Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 03/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wigington, Michael Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 142/152 Rpt: 145/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wigington, Michael 6 Contributor address; City; State; Zip Code Wylie, TX 75098	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilford, Anastasia Contributor address; City; State; Zip Code LEWISVILLE, TX 75067	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilford, Anastasia Contributor address; City; State; Zip Code Lewisville, TX 75067	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 01/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilford, John Contributor address; City; State; Zip Code Lewisville, TX 75057-5207	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Controls Engineer		Employer (See Instructions) Libertarian Party of Texas
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilford, John Contributor address; City; State; Zip Code Lewisville, TX 75057-5207	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Controls Engineer		Employer (See Instructions) Libertarian Party of Texas

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/152 Rpt: 146/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilford, John <hr/> 6 Contributor address; City; State; Zip Code Lewisville, TX 75057-5207	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) Controls Engineer		9 Employer (See Instructions) Libertarian Party of Texas
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilford, John <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75057-5207	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Controls Engineer		Employer (See Instructions) Libertarian Party of Texas
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilford, John <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75057-5207	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Controls Engineer		Employer (See Instructions) Libertarian Party of Texas
Date 04/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilford, John <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75057-5207	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Controls Engineer		Employer (See Instructions) Libertarian Party of Texas
Date 01/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Christopher <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Audio Engineer		Employer (See Instructions) Self Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/152 Rpt: 147/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Christopher <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78626	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Audio Engineer		9 Employer (See Instructions) Self Employed
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Christopher <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Audio Engineer		Employer (See Instructions) Self Employed
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Christopher <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Audio Engineer		Employer (See Instructions) Self Employed
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Christopher <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Audio Engineer		Employer (See Instructions) Self Employed
Date 04/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Christopher <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Audio Engineer		Employer (See Instructions) Self Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/152 Rpt: 148/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Katherine <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78626	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) St. David's Georgetown Hospital
Date 05/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Katherine <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) St. David's Georgetown Hospital
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Katherine <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) St. David's Georgetown Hospital
Date 02/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Katherine <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) St. David's Georgetown Hospital
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Katherine <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) St. David's Georgetown Hospital

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4 Date 04/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Katherine 6 Contributor address; City; State; Zip Code Georgetown, TX 78626	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) St. David's Georgetown Hospital
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilterding, Dan Contributor address; City; State; Zip Code Granbury, TX 76048	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilterding, Dan Contributor address; City; State; Zip Code Granbury, TX 76048	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilterding, Dan Contributor address; City; State; Zip Code Granbury, TX 76048	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 02/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilterding, Dan Contributor address; City; State; Zip Code Granbury, TX 76048	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 147/152 Rpt: 150/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilterding, Dan <hr/> 6 Contributor address; City; State; Zip Code Granbury, TX 76048	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Attempted		9 Employer (See Instructions) Attempted
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilterding, Dan <hr/> Contributor address; City; State; Zip Code Granbury, TX 76048	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, Michael <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$39.69
Principal occupation / Job title (See Instructions) Attempted		Employer (See Instructions) Attempted
Date 01/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wirtz, Joanna <hr/> Contributor address; City; State; Zip Code River Oaks, TX 76114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Package Handler		Employer (See Instructions) UPS
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wirtz, Joanna <hr/> Contributor address; City; State; Zip Code River Oaks, TX 76114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Package Handler		Employer (See Instructions) UPS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/152 Rpt: 151/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wirtz, Joanna <hr/> 6 Contributor address; City; State; Zip Code River Oaks, TX 76114	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Package Handler		9 Employer (See Instructions) UPS
Date 03/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wirtz, Joanna <hr/> Contributor address; City; State; Zip Code River Oaks, TX 76114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Package Handler		Employer (See Instructions) UPS
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wirtz, Joanna <hr/> Contributor address; City; State; Zip Code River Oaks, TX 76114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Package Handler		Employer (See Instructions) UPS
Date 02/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womack, John <hr/> Contributor address; City; State; Zip Code Manor, TX 78653	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Bus Operator		Employer (See Instructions) Capital Metro
Date 01/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodcraft, Ryan <hr/> Contributor address; City; State; Zip Code El Paso, TX 79938	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 149/152 Rpt: 152/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodcraft, Ryan 6 Contributor address; City; State; Zip Code El Paso, TX 79938	7 Amount of Contribution (\$) \$26.06
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodcraft, Ryan Contributor address; City; State; Zip Code El Paso, TX 79938	Amount of Contribution (\$) \$51.80
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodcraft, Ryan Contributor address; City; State; Zip Code El Paso, TX 79938	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodcraft, Ryan Contributor address; City; State; Zip Code El Paso, TX 79938	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodcraft, Ryan Contributor address; City; State; Zip Code El Paso, TX 79938	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 150/152 Rpt: 153/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Bo <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78664	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Solid State Networks LLC
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Bo <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Solid State Networks LLC
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Bo <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Solid State Networks LLC
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Bo <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Solid State Networks LLC
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Bo <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Solid State Networks LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 151/152 Rpt: 154/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Bo 6 Contributor address; City; State; Zip Code Round Rock, TX 78664	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Solid State Networks LLC
Date 01/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Edwin Contributor address; City; State; Zip Code Burton, TX 77835	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Edwin Contributor address; City; State; Zip Code Burton, TX 77835	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Edwin Contributor address; City; State; Zip Code Burton, TX 77835	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Fred Contributor address; City; State; Zip Code Burton, TX 77835	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 152/152 Rpt: 155/253
2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Fred <hr/> 6 Contributor address; City; State; Zip Code Burton, TX 77835	7 Amount of Contribution (\$) \$26.06
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Fred <hr/> Contributor address; City; State; Zip Code Burton, TX 77835	Amount of Contribution (\$) \$26.06
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zurfluh, Nicholas <hr/> Contributor address; City; State; Zip Code Dallas, TX 75244	Amount of Contribution (\$) \$103.30
Principal occupation / Job title (See Instructions) Principal Consultant		Employer (See Instructions) Z2 Technologies

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/12/2025	5 Payee name Campaign Verify	
6 Amount (\$) \$95.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1215 31st Street NW PO Box 3554 Washington, DC 20007	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/17/2025	Payee name Canva	
Amount (\$) \$149.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 200 E 6th Street Suite 200 Austin, TX 78701	
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 Marketing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/20/2025	Payee name Cubesmart	
Amount (\$) \$67.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5 Old Lancaster Road Malvern, PA 19355	
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 Self Storage
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.

1 Total pages Schedule F1: Sch: 2/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/19/2025	5 Payee name Cubesmart	
6 Amount (\$) \$67.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5 Old Lancaster Road Malvern, PA 19355	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Self Storage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/20/2025	Candidate/Officeholder name Office sought Office held	
Payee name Cubesmart		
Amount (\$) \$67.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5 Old Lancaster Road Malvern, PA 19355	
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 Self Storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/21/2025	Candidate/Officeholder name Office sought Office held	
Payee name Cubesmart		
Amount (\$) \$67.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5 Old Lancaster Road Malvern, PA 19355	
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 Self Storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/20/2025	5 Payee name Cubesmart	
6 Amount (\$) \$83.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5 Old Lancaster Road Malvern, PA 19355	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Self Storage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/20/2025	Candidate/Officeholder name Office sought Office held	
Payee name Cubesmart		
Amount (\$) \$16.69 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5 Old Lancaster Road Malvern, PA 19355	
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 Self Storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/01/2025	Candidate/Officeholder name Office sought Office held	
Payee name Digital Ocean		
Amount (\$) \$64.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 101 Avenue of the Americas 10th Floor New York, NY 10013	
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 Forum Hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/02/2025	5 Payee name Digital Ocean	
6 Amount (\$) \$64.41 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 101 Avenue of the Americas 10th Floor New York, NY 10013	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Forum Hosting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/03/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$64.41 <input type="checkbox"/> Expenditure from corporate funds	Payee name Digital Ocean Payee address; City; State; Zip Code 101 Avenue of the Americas 10th Floor New York, NY 10013	
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 Forum Hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/01/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$64.41 <input type="checkbox"/> Expenditure from corporate funds	Payee name Digital Ocean Payee address; City; State; Zip Code 101 Avenue of the Americas 10th Floor New York, NY 10013	
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 Forum Hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/01/2025	5 Payee name Digital Ocean	
6 Amount (\$) \$64.41 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 101 Avenue of the Americas 10th Floor New York, NY 10013	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Forum Hosting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/02/2025	Payee name Digital Ocean	
Amount (\$) \$64.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 101 Avenue of the Americas 10th Floor New York, NY 10013	
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 Forum Hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2025	Payee name EmailMeForm	
Amount (\$) \$199.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 3497 Redwood City, CA 94064	
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 Online Forms
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.

1 Total pages Schedule F1: Sch: 6/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/30/2025	5 Payee name Frost Bank	
6 Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/28/2025	Candidate/Officeholder name Office sought Office held	
Payee name Frost Bank		
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/05/2025	Candidate/Officeholder name Office sought Office held	
Payee name Google		
Amount (\$) \$204.67 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 Email, Docs, Storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/04/2025	5 Payee name Google	
6 Amount (\$) \$205.49 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email, Docs, Storage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/05/2025	Payee name Google	
Amount (\$) \$211.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 Email, Docs, Storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/07/2025	Payee name Google	
Amount (\$) \$211.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 Email, Docs, Storage
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.

1 Total pages Schedule F1: Sch: 8/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/05/2025	5 Payee name Google	
6 Amount (\$) \$218.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email, Docs, Storage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/05/2025	Candidate/Officeholder name Office sought Office held	
Payee name Google		
Amount (\$) \$246.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 Email, Docs, Storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/04/2025	Candidate/Officeholder name Office sought Office held	
Payee name Hale, Kevin		
Amount (\$) \$1,574.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8523 Strathmore Dallas, TX 75238	
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 Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/98 Rpt:		2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955	
4 Date 02/17/2025		5 Payee name Hale, Kevin			
6 Amount (\$) \$1,790.63 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 8523 Strathmore Dallas, TX 75238			
8 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 Contract Labor	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/05/2025		Payee name Hale, Kevin			
Amount (\$) \$1,522.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 8523 Strathmore Dallas, TX 75238			
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 Contract Labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/17/2025		Payee name Hale, Kevin			
Amount (\$) \$1,719.71 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 8523 Strathmore Dallas, TX 75238			
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 Contract Labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/03/2025	5 Payee name Hale, Kevin	
6 Amount (\$) \$1,617.31 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8523 Strathmore Dallas, TX 75238	
8 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 Contract Labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/18/2025	Candidate/Officeholder name Office sought Office held	
Payee name Hale, Kevin		
Amount (\$) \$1,575.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8523 Strathmore Dallas, TX 75238	
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 Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/01/2025	Candidate/Officeholder name Office sought Office held	
Payee name Hale, Kevin		
Amount (\$) \$73.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8523 Strathmore Dallas, TX 75238	
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 Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/01/2025	5 Payee name Hale, Kevin	
6 Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8523 Strathmore Dallas, TX 75238	
8 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 Contract Labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/19/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee name Hale, Kevin Payee address; City; State; Zip Code 8523 Strathmore Dallas, TX 75238	
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 Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/05/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$45.62 <input type="checkbox"/> Expenditure from corporate funds	Payee name Hale, Kevin Payee address; City; State; Zip Code 8523 Strathmore Dallas, TX 75238	
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 Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/05/2025	5 Payee name Hale, Kevin	
6 Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8523 Strathmore Dallas, TX 75238	
8 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 Contract Labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/18/2025	Candidate/Officeholder name Office sought Office held	
Payee name Hale, Kevin		
Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8523 Strathmore Dallas, TX 75238	
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 Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/09/2025	Candidate/Officeholder name Office sought Office held	
Payee name Hampton Inn - Fredericksburg		
Amount (\$) \$636.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 515 E Main Street Fredericksburg, TX 78624	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SLEC Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/18/2025	5 Payee name Haskett, Mary	
6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5604 B Creek Bottom Austin, TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/19/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$812.50 <input type="checkbox"/> Expenditure from corporate funds	Payee name Haskett, Mary Payee address; City; State; Zip Code 5604 B Creek Bottom Austin, TX 78731	
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 Rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/18/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee name Haskett, Mary Payee address; City; State; Zip Code 5604 B Creek Bottom Austin, TX 78731	
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 Rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/21/2025	5 Payee name Haskett, Mary	
6 Amount (\$) \$812.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5604 B Creek Bottom Austin, TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/31/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$191.48 <input type="checkbox"/> Expenditure from corporate funds	Payee name Hilton (Waco) Payee address; City; State; Zip Code 113 S University Parks Drive Waco, TX 76701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SLEC Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/12/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$745.89 <input type="checkbox"/> Expenditure from corporate funds	Payee name Hilton (Waco) Payee address; City; State; Zip Code 113 S University Parks Drive Waco, TX 76701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SLEC Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/06/2025	5 Payee name Hilton Garden Inn (Houston West-Katy)	
6 Amount (\$) \$884.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2409 Texmati Drive Katy, TX 77494	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SLEC Meeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/01/2025	Candidate/Officeholder name Office sought Office held	
Payee name InkTech		
Amount (\$) \$100.67 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7600 McEwen Road Dayton, OH 45459	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/14/2025	Candidate/Officeholder name Office sought Office held	
Payee name Intuit Quickbooks		
Amount (\$) \$105.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2700 Coast Avenue Mountain View, CA 94043	
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 Financial Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/17/2025	5 Payee name Intuit Quickbooks	
6 Amount (\$) \$105.53 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2700 Coast Avenue Mountain View, CA 94043	
8 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 Financial Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/17/2025	Candidate/Officeholder name Office sought Office held	
Payee name Intuit Quickbooks		
Amount (\$) \$105.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2700 Coast Avenue Mountain View, CA 94043	
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 Financial Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/15/2025	Candidate/Officeholder name Office sought Office held	
Payee name Intuit Quickbooks		
Amount (\$) \$105.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2700 Coast Avenue Mountain View, CA 94043	
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 Financial Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/15/2025	5 Payee name Intuit Quickbooks	
6 Amount (\$) \$105.53 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2700 Coast Avenue Mountain View, CA 94043	
8 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 Financial Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/16/2025	Candidate/Officeholder name Office sought Office held	
Payee name Intuit Quickbooks		
Amount (\$) \$105.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2700 Coast Avenue Mountain View, CA 94043	
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 Financial Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/08/2025	Candidate/Officeholder name Office sought Office held	
Payee name Kwik Kopy Business Centers		
Amount (\$) \$155.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2305 S Day Street Brenham, TX 77833	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/20/2025	5 Payee name Kwik Kopy Business Centers	
6 Amount (\$) \$51.08 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2305 S Day Street Brenham, TX 77833	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/04/2025	Candidate/Officeholder name Office sought Office held	
Payee name Kwik Kopy Business Centers		
Amount (\$) \$51.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2305 S Day Street Brenham, TX 77833	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/12/2025	Candidate/Officeholder name Office sought Office held	
Payee name Kwik Kopy Business Centers		
Amount (\$) \$42.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2305 S Day Street Brenham, TX 77833	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/08/2025	5 Payee name Kwik Kopy Business Centers	
6 Amount (\$) \$10.71 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2305 S Day Street Brenham, TX 77833	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/24/2025	Candidate/Officeholder name Office sought Office held	
Payee name LogMeIn		
Amount (\$) \$173.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 333 Summer Street 5th Floor Boston, MA 02210	
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 1800 Number
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/15/2025	Candidate/Officeholder name Office sought Office held	
Payee name Loomly		
Amount (\$) \$766.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 611 N Howard Street Apt 214 Glendale, CA 91206	
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 Tool
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/26/2025	5 Payee name MightyCall	
6 Amount (\$) \$2.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 919 N Market Street #950 Wilmington, DE 19801	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/26/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$4.85 <input type="checkbox"/> Expenditure from corporate funds	Payee name MightyCall Payee address; City; State; Zip Code 919 N Market Street #950 Wilmington, DE 19801	
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 Phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/26/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$65.00 <input type="checkbox"/> Expenditure from corporate funds	Payee name MightyCall Payee address; City; State; Zip Code 919 N Market Street #950 Wilmington, DE 19801	
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 Phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/25/2025	5 Payee name MightyCall	
6 Amount (\$) \$2.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 919 N Market Street #950 Wilmington, DE 19801	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/25/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$4.85 <input type="checkbox"/> Expenditure from corporate funds	Payee name MightyCall Payee address; City; State; Zip Code 919 N Market Street #950 Wilmington, DE 19801	
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 Phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/25/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$65.00 <input type="checkbox"/> Expenditure from corporate funds	Payee name MightyCall Payee address; City; State; Zip Code 919 N Market Street #950 Wilmington, DE 19801	
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 Phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/25/2025	5 Payee name MightyCall	
6 Amount (\$) \$2.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 919 N Market Street #950 Wilmington, DE 19801	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/25/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$4.85 <input type="checkbox"/> Expenditure from corporate funds	Payee name MightyCall Payee address; City; State; Zip Code 919 N Market Street #950 Wilmington, DE 19801	
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 Phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/25/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$65.00 <input type="checkbox"/> Expenditure from corporate funds	Payee name MightyCall Payee address; City; State; Zip Code 919 N Market Street #950 Wilmington, DE 19801	
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 Phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/25/2025	5 Payee name MightyCall	
6 Amount (\$) \$2.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 919 N Market Street #950 Wilmington, DE 19801	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/25/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$4.86 <input type="checkbox"/> Expenditure from corporate funds	Payee name MightyCall Payee address; City; State; Zip Code 919 N Market Street #950 Wilmington, DE 19801	
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 Phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/25/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$65.00 <input type="checkbox"/> Expenditure from corporate funds	Payee name MightyCall Payee address; City; State; Zip Code 919 N Market Street #950 Wilmington, DE 19801	
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 Phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/27/2025	5 Payee name MightyCall	
6 Amount (\$) \$2.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 919 N Market Street #950 Wilmington, DE 19801	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/27/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$5.61 <input type="checkbox"/> Expenditure from corporate funds	Payee name MightyCall Payee address; City; State; Zip Code 919 N Market Street #950 Wilmington, DE 19801	
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 Phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/27/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$75.00 <input type="checkbox"/> Expenditure from corporate funds	Payee name MightyCall Payee address; City; State; Zip Code 919 N Market Street #950 Wilmington, DE 19801	
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 Phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/02/2025	5 Payee name Moore, Ginny	
6 Amount (\$) \$3,224.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1240 Rehburg Road Brenham, TX 77833	
8 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 Contract Labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/16/2025	Candidate/Officeholder name Payee name Namecheap	
Amount (\$) \$15.16 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4600 East Washington Street Suite 300 Phoenix, AZ 85034	
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 Domain Name
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/14/2025	Candidate/Officeholder name Payee name Nationbuilder	
Amount (\$) \$1,250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081	
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 CRM Service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 26/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/17/2025	5 Payee name Nationbuilder	
6 Amount (\$) \$1,250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081	
8 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 CRM Service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/17/2025	Candidate/Officeholder name Office sought Office held	
Payee name Nationbuilder		
Amount (\$) \$1,250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081	
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 CRM Service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/15/2025	Candidate/Officeholder name Office sought Office held	
Payee name Nationbuilder		
Amount (\$) \$1,250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081	
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 CRM Service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 27/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/15/2025	5 Payee name Nationbuilder	
6 Amount (\$) \$1,250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081	
8 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 CRM Service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/16/2025	Candidate/Officeholder name Office sought Office held	
Payee name Nationbuilder		
Amount (\$) \$1,300.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081	
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 CRM Service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name OPAVote		
Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 50A Spring Street Somerville, MA 02143	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 28/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/07/2025	5 Payee name Opex Communications	
6 Amount (\$) \$11.57 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3777 Long Beach Blvd Suite 300 Long Beach, CA 90807	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 1800 Number
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Opex Communications		
Amount (\$) \$13.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3777 Long Beach Blvd Suite 300 Long Beach, CA 90807	
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 1800 Number
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/05/2025	Candidate/Officeholder name Office sought Office held	
Payee name Opex Communications		
Amount (\$) \$13.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3777 Long Beach Blvd Suite 300 Long Beach, CA 90807	
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 1800 Number
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 29/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/04/2025	5 Payee name Opex Communications	
6 Amount (\$) \$10.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3777 Long Beach Blvd Suite 300 Long Beach, CA 90807	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 1800 Number
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/06/2025	Payee name Opex Communications	
Amount (\$) \$6.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3777 Long Beach Blvd Suite 300 Long Beach, CA 90807	
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 1800 Number
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2025	Payee name Pantke, Jocelyn	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3304 Hunter Cove Drive Arlington, TX 76001	
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 Contract Labor
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.

1 Total pages Schedule F1: Sch: 30/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/03/2025	5 Payee name Pantke, Jocelyn	
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3304 Hunter Cove Drive Arlington, TX 76001	
8 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 Contract Labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/01/2025	Candidate/Officeholder name Payee name Pantke, Jocelyn	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code 3304 Hunter Cove Drive Arlington, TX 76001	
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 Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/01/2025	Candidate/Officeholder name Payee name Pantke, Jocelyn	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code 3304 Hunter Cove Drive Arlington, TX 76001	
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 Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 31/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/02/2025	5 Payee name Pantke, Jocelyn	
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3304 Hunter Cove Drive Arlington, TX 76001	
8 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 Contract Labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/18/2025	Candidate/Officeholder name Office sought Office held	
Payee name Polsky, Nathan		
Amount (\$) \$2,925.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7991 FM 137 Paris, TX 75460	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In Person Training
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/16/2025	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$45.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake Drive Charlotte, NC 28273	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merch Store
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 32/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/29/2025	5 Payee name Printful	
6 Amount (\$) \$26.46 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake Drive Charlotte, NC 28273	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merch Store
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/05/2025	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$17.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake Drive Charlotte, NC 28273	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merch Store
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/02/2025	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$15.18 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake Drive Charlotte, NC 28273	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merch Store
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 33/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/21/2025	5 Payee name Printful	
6 Amount (\$) \$15.94 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake Drive Charlotte, NC 28273	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merch Store
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/28/2025	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$26.68 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake Drive Charlotte, NC 28273	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merch Store
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/06/2025	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$45.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake Drive Charlotte, NC 28273	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merch Store
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 34/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/17/2025	5 Payee name Printful	
6 Amount (\$) \$42.91 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake Drive Charlotte, NC 28273	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merch Store
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/30/2025	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$92.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake Drive Charlotte, NC 28273	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merch Store
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/31/2025	Candidate/Officeholder name Office sought Office held	
Payee name Rpr Consultants		
Amount (\$) \$605.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 301 West Avenue Apt 4504 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In Person Training
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 35/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/02/2025	5 Payee name Stripe Express	
6 Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/02/2025	Candidate/Officeholder name	Office sought
Office held		
Date 01/02/2025	Payee name Stripe Express	
Amount (\$) \$8.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/05/2025	Candidate/Officeholder name	Office sought
Office held		
Date 01/05/2025	Payee name Stripe Express	
Amount (\$) \$7.46 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/05/2025	Candidate/Officeholder name	Office sought
Office held		
Date 01/05/2025	Payee name Stripe Express	
Amount (\$) \$7.46 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 36/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/05/2025	5 Payee name Stripe Express	
6 Amount (\$) \$13.27 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/06/2025	Payee name Stripe Express	
Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/07/2025	Payee name Stripe Express	
Amount (\$) \$2.78 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
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.

1 Total pages Schedule F1: Sch: 37/98 Rpt:		2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955	
4 Date 01/07/2025		5 Payee name Stripe Express			
6 Amount (\$) \$9.87 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 01/08/2025		Payee name Stripe Express			
Amount (\$) \$3.96 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 01/09/2025		Payee name Stripe Express			
Amount (\$) \$4.88 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 38/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/09/2025	5 Payee name Stripe Express	
6 Amount (\$) \$29.30 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/12/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$3.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/12/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$3.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/12/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$3.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 39/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/13/2025	5 Payee name Stripe Express	
6 Amount (\$) \$0.90 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/14/2025	Payee name Stripe Express	
Amount (\$) \$3.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/14/2025	Payee name Stripe Express	
Amount (\$) \$7.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 40/98 Rpt:		2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955	
4 Date 01/15/2025		5 Payee name Stripe Express			
6 Amount (\$) \$4.88 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 01/16/2025		Payee name Stripe Express			
Amount (\$) \$1.18 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 01/20/2025		Payee name Stripe Express			
Amount (\$) \$1.77 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 41/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/20/2025	5 Payee name Stripe Express	
6 Amount (\$) \$3.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/21/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$1.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/21/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 42/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/22/2025	5 Payee name Stripe Express	
6 Amount (\$) \$3.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/22/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$15.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/23/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 43/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/23/2025	5 Payee name Stripe Express	
6 Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/23/2025	Candidate/Officeholder name	Office sought
Office held		
Date 01/23/2025	Payee name Stripe Express	
Amount (\$) \$2.52 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/26/2025	Candidate/Officeholder name	Office sought
Office held		
Date 01/26/2025	Payee name Stripe Express	
Amount (\$) \$1.65 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/26/2025	Candidate/Officeholder name	Office sought
Office held		
Date 01/26/2025	Payee name Stripe Express	
Amount (\$) \$1.65 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 44/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/26/2025	5 Payee name Stripe Express	
6 Amount (\$) \$40.65 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/27/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$4.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/27/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$7.78 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/27/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$7.78 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 45/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/28/2025	5 Payee name Stripe Express	
6 Amount (\$) \$3.94 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/28/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$22.35 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/29/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$0.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 46/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/30/2025	5 Payee name Stripe Express	
6 Amount (\$) \$2.55 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/30/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$3.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/04/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$10.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 47/98 Rpt:		2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955	
4 Date 02/04/2025		5 Payee name Stripe Express			
6 Amount (\$) \$62.13 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/05/2025		Payee name Stripe Express			
Amount (\$) \$1.75 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/05/2025		Payee name Stripe Express			
Amount (\$) \$3.24 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 48/98 Rpt:		2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955	
4 Date 02/06/2025		5 Payee name Stripe Express			
6 Amount (\$) \$1.95 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/06/2025		Payee name Stripe Express			
Amount (\$) \$3.20 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/09/2025		Payee name Stripe Express			
Amount (\$) \$0.45 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 49/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/09/2025	5 Payee name Stripe Express	
6 Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/10/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$1.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/11/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$10.19 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 50/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/12/2025	5 Payee name Stripe Express	
6 Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/13/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$3.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/13/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$4.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 51/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/17/2025	5 Payee name Stripe Express	
6 Amount (\$) \$2.18 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/18/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$6.52 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/19/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$3.20 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 52/98 Rpt:		2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955	
4 Date 02/19/2025		5 Payee name Stripe Express			
6 Amount (\$) \$17.61 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/20/2025		Payee name Stripe Express			
Amount (\$) \$5.90 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/24/2025		Payee name Stripe Express			
Amount (\$) \$7.66 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 53/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/25/2025	5 Payee name Stripe Express	
6 Amount (\$) \$1.48 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/26/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/26/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$2.78 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/26/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$2.78 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 54/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 02/26/2025	5 Payee name Stripe Express	
6 Amount (\$) \$8.62 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/27/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$4.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/28/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$12.64 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 55/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/03/2025	5 Payee name Stripe Express	
6 Amount (\$) \$5.41 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/04/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$1.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/05/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$4.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 56/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/05/2025	5 Payee name Stripe Express	
6 Amount (\$) \$10.62 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/06/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$3.24 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/07/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1.95 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 57/98 Rpt:		2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955	
4 Date 03/09/2025		5 Payee name Stripe Express			
6 Amount (\$) \$0.45 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/11/2025		Payee name Stripe Express			
Amount (\$) \$9.58 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/12/2025		Payee name Stripe Express			
Amount (\$) \$1.75 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 58/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/12/2025	5 Payee name Stripe Express	
6 Amount (\$) \$9.91 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/14/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$4.62 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/17/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1.73 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 59/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/18/2025	5 Payee name Stripe Express	
6 Amount (\$) \$3.13 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/19/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$3.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/19/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$11.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/19/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$11.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 60/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/20/2025	5 Payee name Stripe Express	
6 Amount (\$) \$2.78 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/21/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$4.87 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/24/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$8.69 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 61/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/25/2025	5 Payee name Stripe Express	
6 Amount (\$) \$0.45 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/26/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/26/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$7.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/26/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$7.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 62/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 03/26/2025	5 Payee name Stripe Express	
6 Amount (\$) \$42.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/27/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$3.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/28/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$11.58 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 63/98 Rpt:		2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955	
4 Date 03/31/2025		5 Payee name Stripe Express			
6 Amount (\$) \$5.41 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/01/2025		Payee name Stripe Express			
Amount (\$) \$1.33 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/02/2025		Payee name Stripe Express			
Amount (\$) \$1.94 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 64/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/03/2025	5 Payee name Stripe Express	
6 Amount (\$) \$6.42 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/03/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$8.58 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/04/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$0.59 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 65/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/04/2025	5 Payee name Stripe Express	
6 Amount (\$) \$15.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/07/2025	Payee name Stripe Express	
Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/07/2025	Payee name Stripe Express	
Amount (\$) \$3.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
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.

1 Total pages Schedule F1: Sch: 66/98 Rpt:		2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955	
4 Date 04/08/2025		5 Payee name Stripe Express			
6 Amount (\$) \$3.24 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/08/2025		Payee name Stripe Express			
Amount (\$) \$17.43 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/09/2025		Payee name Stripe Express			
Amount (\$) \$1.75 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 67/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/09/2025	5 Payee name Stripe Express	
6 Amount (\$) \$8.59 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/10/2025	Payee name Stripe Express	
Amount (\$) \$4.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/11/2025	Payee name Stripe Express	
Amount (\$) \$2.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 68/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/14/2025	5 Payee name Stripe Express	
6 Amount (\$) \$0.90 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/16/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$3.85 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/16/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$18.74 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 69/98 Rpt:		2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955	
4 Date 04/17/2025		5 Payee name Stripe Express			
6 Amount (\$) \$1.18 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/18/2025		Payee name Stripe Express			
Amount (\$) \$1.77 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/21/2025		Payee name Stripe Express			
Amount (\$) \$2.83 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 70/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/21/2025	5 Payee name Stripe Express	
6 Amount (\$) \$3.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/22/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$1.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/23/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$14.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 71/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/24/2025	5 Payee name Stripe Express	
6 Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/24/2025	Candidate/Officeholder name	Office sought
Payee name Stripe Express	Office held	
Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/24/2025	Candidate/Officeholder name	Office sought
Payee name Stripe Express	Office held	
Amount (\$) \$1.93 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/24/2025	Candidate/Officeholder name	Office sought
Payee name Stripe Express	Office held	
Amount (\$) \$1.93 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 72/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/25/2025	5 Payee name Stripe Express	
6 Amount (\$) \$1.65 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/25/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$1.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/28/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$3.56 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 73/98 Rpt:		2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955	
4 Date 04/29/2025		5 Payee name Stripe Express			
6 Amount (\$) \$3.88 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/30/2025		Payee name Stripe Express			
Amount (\$) \$0.45 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/30/2025		Payee name Stripe Express			
Amount (\$) \$0.59 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 74/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/30/2025	5 Payee name Stripe Express	
6 Amount (\$) \$18.90 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/01/2025	Payee name Stripe Express	
Amount (\$) \$1.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/02/2025	Payee name Stripe Express	
Amount (\$) \$0.59 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 75/98 Rpt:		2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955	
4 Date 05/05/2025		5 Payee name Stripe Express			
6 Amount (\$) \$1.06 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/05/2025		Payee name Stripe Express			
Amount (\$) \$5.36 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/05/2025		Payee name Stripe Express			
Amount (\$) \$58.30 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 76/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/06/2025	5 Payee name Stripe Express	
6 Amount (\$) \$0.45 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/06/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/07/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$5.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 77/98 Rpt:		2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955	
4 Date 05/07/2025		5 Payee name Stripe Express			
6 Amount (\$) \$27.28 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/08/2025		Payee name Stripe Express			
Amount (\$) \$3.20 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/09/2025		Payee name Stripe Express			
Amount (\$) \$3.85 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 78/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/12/2025	5 Payee name Stripe Express	
6 Amount (\$) \$3.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/13/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$2.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/13/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$6.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 79/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/14/2025	5 Payee name Stripe Express	
6 Amount (\$) \$5.52 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/15/2025	Payee name Stripe Express	
Amount (\$) \$1.73 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/15/2025	Payee name Stripe Express	
Amount (\$) \$3.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 80/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/16/2025	5 Payee name Stripe Express	
6 Amount (\$) \$3.13 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/16/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$9.00 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/19/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$2.93 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 81/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/20/2025	5 Payee name Stripe Express	
6 Amount (\$) \$1.18 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/21/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$0.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/21/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$9.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/21/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$9.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 82/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/21/2025	5 Payee name Stripe Express	
6 Amount (\$) \$61.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/22/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$7.66 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/27/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 83/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/27/2025	5 Payee name Stripe Express	
6 Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2025	Payee name Stripe Express	
Amount (\$) \$55.47 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/28/2025	Payee name Stripe Express	
Amount (\$) \$1.65 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
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.

1 Total pages Schedule F1: Sch: 84/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/28/2025	5 Payee name Stripe Express	
6 Amount (\$) \$1.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/29/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$0.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/29/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$22.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/29/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$22.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 85/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 05/30/2025	5 Payee name Stripe Express	
6 Amount (\$) \$0.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/04/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$1.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/04/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$2.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 86/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/04/2025	5 Payee name Stripe Express	
6 Amount (\$) \$10.18 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/05/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/05/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$2.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/05/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Express		
Amount (\$) \$2.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 87/98 Rpt:		2 FILER NAME Libertarian Party of Texas		3 Filer ID (Ethics Commission Filers) 00055955	
4 Date 06/06/2025		5 Payee name Stripe Express			
6 Amount (\$) \$0.45 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 06/06/2025		Payee name Stripe Express			
Amount (\$) \$3.24 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 06/09/2025		Payee name Stripe Express			
Amount (\$) \$1.95 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 88/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/11/2025	5 Payee name Stripe Express	
6 Amount (\$) \$8.69 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/12/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$0.90 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/16/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$4.62 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 89/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/17/2025	5 Payee name Stripe Express	
6 Amount (\$) \$2.18 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/18/2025	Payee name Stripe Express	
Amount (\$) \$6.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/20/2025	Payee name Stripe Express	
Amount (\$) \$1.35 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
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.

1 Total pages Schedule F1: Sch: 90/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/20/2025	5 Payee name Stripe Express	
6 Amount (\$) \$3.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2025	Payee name Stripe Express	
Amount (\$) \$1.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/24/2025	Payee name Stripe Express	
Amount (\$) \$11.31 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
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.

1 Total pages Schedule F1: Sch: 91/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/25/2025	5 Payee name Stripe Express	
6 Amount (\$) \$1.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/25/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$2.78 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/25/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$6.09 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/25/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$6.09 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 92/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/26/2025	5 Payee name Stripe Express	
6 Amount (\$) \$3.56 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/27/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$3.88 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/30/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$9.52 <input type="checkbox"/> Expenditure from corporate funds	Payee name Stripe Express Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 93/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/22/2025	5 Payee name Stripe Payments	
6 Amount (\$) \$1.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/03/2025	Payee name Stripe Payments	
Amount (\$) \$1.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/07/2025	Payee name Stripe Payments	
Amount (\$) \$1.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 94/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 04/23/2025	5 Payee name Stripe Payments	
6 Amount (\$) \$0.94 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/30/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Payments		
Amount (\$) \$1.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/10/2025	Candidate/Officeholder name Office sought Office held	
Payee name Stripe Payments		
Amount (\$) \$1.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 95/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/18/2025	5 Payee name Stripe Payments	
6 Amount (\$) \$1.99 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 351 Oyster Point Blvd South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/18/2025	Payee name SunStar Press	
Amount (\$) \$3,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 342 Kalamazoo, MI 49005	
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 Marketing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/28/2025	Payee name Texas Medialink	
Amount (\$) \$525.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 200 E Grayson Street Suite 126 San Antonio, TX 78215	
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 Marketing
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.

1 Total pages Schedule F1: Sch: 96/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 01/02/2025	5 Payee name USPS (Austin)	
6 Amount (\$) \$171.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 823 Congress Avenue Suite 150 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PO Box
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/13/2025	Payee name USPS (Austin)	
Amount (\$) \$73.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 823 Congress Avenue Suite 150 Austin, TX 78701	
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 PO Box
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/03/2025	Payee name USPS (Austin)	
Amount (\$) \$10.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 823 Congress Avenue Suite 150 Austin, TX 78701	
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 Postage
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.

1 Total pages Schedule F1: Sch: 97/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/18/2025	5 Payee name USPS (Austin)	
6 Amount (\$) \$180.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 823 Congress Avenue Suite 150 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PO Box
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/02/2025	Payee name Uz Marketing	
Amount (\$) \$420.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5900 Bingle Road Houston, TX 77092	
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 Marketing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/28/2025	Payee name Vista Print USA	
Amount (\$) \$80.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 95 Hayden Avenue Lexington, MA 02421	
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 Marketing
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.

1 Total pages Schedule F1: Sch: 98/98 Rpt:	2 FILER NAME Libertarian Party of Texas	3 Filer ID (Ethics Commission Filers) 00055955
4 Date 06/26/2025	5 Payee name Zoom	
6 Amount (\$) \$170.46 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 55 Almaden Blvd #600 San Jose, CA 95113	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communications
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held