

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00085955	2 Total pages filed: 85
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Angelia Duke	MI
	NICKNAME	LAST Orr	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 337 Itasca, TX 76055		ZIP CODE
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Robert	MI
	NICKNAME	LAST Cervenka	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1965 Mount Moriah Rd. Riesel, TX 76682		
7 CAMPAIGN TREASURER PHONE	AREA CODE (254)	PHONE NUMBER 875-2286	EXTENSION
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year 01/01/2025	THROUGH Month Day Year 06/30/2025	
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
	11 OFFICE OFFICE HELD (if any) State Representative District 13		12 OFFICE SOUGHT (if known) State Representative District 13

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2 of 85

13 C / OH NAME Orr, Angelia Duke (The Honorable)	14 Filer ID (Ethics Commission Filers) 00085955
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 48,959.56
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 1,194.89
	4. TOTAL POLITICAL EXPENDITURES	\$ 58,769.72
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 101,820.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 53,451.40

17 AFFIDAVIT

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

The Honorable Angelia Duke Orr

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

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

3 of 85

18 FILER NAME Orr, Angelia Duke (The Honorable)		19 Filer ID 00085955	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	46,699.56
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	2,260.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	50,461.31
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	865.20
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	3,631.80
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	3,811.41
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	441.66

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/11 Rpt: 4/85
2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 Date 06/26/2025	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00235739) BNSF RAILPAC <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 75161	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Blackridge <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Capitol Leadership Fund <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Cervenka, Robert (Mr.) <hr/> Contributor address; City; State; Zip Code Riesel, TX 76682	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Costecnik, Dora Ann <hr/> Contributor address; City; State; Zip Code Pattison, TX 77466	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/11 Rpt: 5/85
2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Jackie 6 Contributor address; City; State; Zip Code Abilene, TX 79605	7 Amount of Contribution (\$) \$52.05
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Jackie Contributor address; City; State; Zip Code Abilene, TX 79605	Amount of Contribution (\$) \$26.03
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DTH Strategies LLC Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delisi Communications PAC Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erben & Yarbrough Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/11 Rpt: 6/85
2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 Date 06/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Georgiades, Kelley <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of Contribution (\$) \$2,082.03
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) SES
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez Public Affairs & Consulting <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grace & McEwan Consulting LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greyhawk Public Affairs, LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOMEPAC of the Texas Association of Builders <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/11 Rpt: 7/85
2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 Date 06/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Charles (Mr.) 6 Contributor address; City; State; Zip Code Hillsboro, TX 76645	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heldenfels, Fred Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Heldenfels Enterprises, Inc.
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, John (Mr.) Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$156.15
Principal occupation / Job title (See Instructions) Rural Health		Employer (See Instructions) TORCH
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillco Political Action Committee Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holzheuser, Craig (Mr.) Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/11 Rpt: 8/85
2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivey, Leanne (Ms.) 6 Contributor address; City; State; Zip Code Benbrook, TX 76126	7 Amount of Contribution (\$) \$260.25
8 Principal occupation / Job title (See Instructions) Campaign		9 Employer (See Instructions) Roger Williams
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacob, Edward (Mr.) Contributor address; City; State; Zip Code Hubbard, TX 76648	Amount of Contribution (\$) \$104.10
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacob, Edward (Mr.) Contributor address; City; State; Zip Code Hubbard, TX 76648	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lee Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Texas Council
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Michael Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,041.02
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/11 Rpt: 9/85
2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Sharon (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Hillsboro, TX 76645	7 Amount of Contribution (\$) \$52.05
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lake, Martin (Mr.) <hr/> Contributor address; City; State; Zip Code Hillsboro, TX 76645	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Commissioner		Employer (See Instructions) Hill County
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd Gosselink Rochelle & Townsend PC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marquez, Enrique (Mr.) <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moak Casey Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/11 Rpt: 10/85
2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 Date 06/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neerman, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75218	7 Amount of Contribution (\$) \$260.25
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Jackson Walker
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce Mitchell Legislative Solutions LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Political Action Committee of The Independent Insurance Agents of Texas <hr/> Contributor address; City; State; Zip Code Austin, TX 78768	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rove, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,041.02
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Infrastructure Solutions, Inc.
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rural Friends of Electric Cooperatives <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/11 Rpt: 11/85
2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Blair <hr/> 6 Contributor address; City; State; Zip Code Abbott, TX 76621	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sawyer, Nancy (Ms.) <hr/> Contributor address; City; State; Zip Code Longview, TX 75604	Amount of Contribution (\$) \$104.10
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schronk, Rodney (Mr.) <hr/> Contributor address; City; State; Zip Code Hillsboro, TX 76645	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) Self
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siddons, Jamie <hr/> Contributor address; City; State; Zip Code Hillsboro, TX 76645	Amount of Contribution (\$) \$520.51
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) Julie Siddons Realtors
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/11 Rpt: 12/85
2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 Date 06/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Reasonable Solutions Political Action Committee <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78741	7 Amount of Contribution (\$) \$3,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Dental Association Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Farm Bureau AGFUND <hr/> Contributor address; City; State; Zip Code Waco, TX 76702	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Land Title Association Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Medical Association Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/11 Rpt: 13/85
2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 Date 06/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WR Brannan & Associates LLC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, T Kevin <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekley, Richard (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Weekley Development Company
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Darryl and Gayle <hr/> Contributor address; City; State; Zip Code Teague, TX 75860	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Physician, College Professor		Employer (See Instructions) Freestone Medical Center, Sul Ross State University
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wholesale Beer Distributors of Texas Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/11 Rpt: 14/85
2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 Date 06/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, James (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/2 Rpt: 15/85	
2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/25/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Republicans of Texas Campaign Fund 7 Contributor address; City; State; Zip Code Austin, TX 78701	8 Amount of contribution (\$) \$1,000.00	9 In-kind contribution description Campaign digital advertising
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HS Law Political Action Committee Contributor address; City; State; Zip Code Austin, TX 78701	Amount of contribution (\$) \$380.00	In-kind contribution description Campaign digital advertising
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HS Law Political Action Committee Contributor address; City; State; Zip Code Austin, TX 78701	Amount of contribution (\$) \$250.00	In-kind contribution description Rent for political fundraiser event space
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/2 Rpt: 16/85	
2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/24/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Second Floor Strategies 7 Contributor address; City; State; Zip Code Austin, TX 78701	8 Amount of contribution (\$) \$380.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	9 In-kind contribution description Campaign fundraiser email distribution
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Bankers Association Political Action Committee Contributor address; City; State; Zip Code Austin, TX 78701	Amount of contribution (\$) \$250.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description Rent for political fundraiser event space
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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: 1/23 Rpt: 17/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 01/30/2025	5 Payee name Advocacy Center for Crime Victims & Children	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 3312 Hilcrest Drive Waco, TX 76708	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charitable donation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/09/2025	Payee name Bosque Animal Rescue Kennels Inc.	
Amount (\$) \$240.00	Payee address; City; State; Zip Code 4340 Highway 6 Clifton, TX 76634	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charitable contribution - golf tournament team
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/15/2025	Payee name Bosque County Republican Club	
Amount (\$) \$10.00	Payee address; City; State; Zip Code 505 W. 5th Street Ste. 240 Clifton, TX 76634	
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 Political contribution
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: 2/23 Rpt: 18/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 02/06/2025	5 Payee name Burchett, Audrey	
6 Amount (\$) \$57.00	7 Payee address; City; State; Zip Code 18951 Calle Cierra San Antonio, TX 78258	
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 Staff parking reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/01/2025	Payee name Burchett, Audrey	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 18951 Calle Cierra San Antonio, TX 78258	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/03/2025	Payee name CASA of Freestone and and Limestone Counties	
Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 767 Mexia, TX 76667	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charitable contribution - table sponsor
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: 3/23 Rpt: 19/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 01/31/2025	5 Payee name Catalyst Advisors Group LLC	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1108 Lavaca Street Ste. 110-506 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Political consulting - campaign services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/27/2025	Payee name Catalyst Advisors Group LLC	
Amount (\$) \$1,483.72	Payee address; City; State; Zip Code 1108 Lavaca Street Ste. 110-506 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Political consulting - campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2025	Payee name Citizens National Bank	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 1300 Corsicana Hwy. Hillsboro, TX 76645	
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 Incoming wire fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/23 Rpt: 20/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 02/11/2025	5 Payee name Clo & Company	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 209 S Keechi Street Ste. 101 Fairfield, TX 75840	
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 Political advertising
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/11/2025	Payee name Constant Contact	
Amount (\$) \$86.34	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
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 distribution service for campaign office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/11/2025	Payee name Constant Contact	
Amount (\$) \$86.34	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
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 distribution service for campaign office
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: 5/23 Rpt: 21/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 03/11/2025	5 Payee name Constant Contact	
6 Amount (\$) \$86.34	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
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 distribution service for campaign office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/11/2025	Payee name Constant Contact	
Amount (\$) \$86.34	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
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 distribution service for campaign office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/11/2025	Payee name Constant Contact	
Amount (\$) \$86.34	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
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 distribution service for campaign office
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: 6/23 Rpt: 22/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 06/12/2025	5 Payee name Constant Contact	
6 Amount (\$) \$97.00	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
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 distribution service for campaign office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/01/2025	Payee name Cooper, Nicholas	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 2118 DeMilo Drive Houston, TX 77018	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/05/2025	Payee name Facebook	
Amount (\$) \$498.86	Payee address; City; State; Zip Code 600 Congress Avenue 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 Political advertising - social media
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: 7/23 Rpt: 23/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 01/03/2025	5 Payee name Hill Country Springs	
6 Amount (\$) \$9.82	7 Payee address; City; State; Zip Code 10019 S Interstate 35 Frontage Road Austiin, TX 78747	
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 water for Capitol Office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/04/2025	Payee name Hill Country Springs	
Amount (\$) \$30.82	Payee address; City; State; Zip Code 10019 S Interstate 35 Frontage Road Austiin, TX 78747	
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 Water for Capitol office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/04/2025	Payee name Hill Country Springs	
Amount (\$) \$51.82	Payee address; City; State; Zip Code 10019 S Interstate 35 Frontage Road Austiin, TX 78747	
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 Water for Capitol office
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: 8/23 Rpt: 24/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 04/02/2025	5 Payee name Hill Country Springs	
6 Amount (\$) \$42.82	7 Payee address; City; State; Zip Code 10019 S Interstate 35 Frontage Road Austiin, TX 78747	
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 Water for Capitol office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/02/2025	Payee name Hill Country Springs	
Amount (\$) \$51.82	Payee address; City; State; Zip Code 10019 S Interstate 35 Frontage Road Austiin, TX 78747	
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 Water for Capitol office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/03/2025	Payee name Hill Country Springs	
Amount (\$) \$89.81	Payee address; City; State; Zip Code 10019 S Interstate 35 Frontage Road Austiin, TX 78747	
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 Water for Capitol office
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: 9/23 Rpt: 25/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 01/03/2025	5 Payee name Humphries, Lynne	
6 Amount (\$) \$2,381.00	7 Payee address; City; State; Zip Code 1515 Savannah Drive Richmond, TX 77406	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent for political apartment maintained in Austin
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/03/2025	Candidate/Officeholder name Humphries, Lynne	
Amount (\$) \$2,381.00	Payee address; City; State; Zip Code 1515 Savannah Drive Richmond, TX 77406	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent for political apartment maintained in Austin
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/03/2025	Candidate/Officeholder name Humphries, Lynne	
Amount (\$) \$2,381.00	Payee address; City; State; Zip Code 1515 Savannah Drive Richmond, TX 77406	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent for political apartment maintained in Austin
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/03/2025	Candidate/Officeholder name Humphries, Lynne	
Amount (\$) \$2,381.00	Payee address; City; State; Zip Code 1515 Savannah Drive Richmond, TX 77406	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent for political apartment maintained in Austin
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: 10/23 Rpt: 26/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 01/31/2025	5 Payee name Humphries, Lynne	
6 Amount (\$) \$2,381.00	7 Payee address; City; State; Zip Code 1515 Savannah Drive Richmond, TX 77406	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent for political apartment maintained in Austin
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/05/2025	Candidate/Officeholder name Humphries, Lynne	
Amount (\$) \$2,381.00	Payee address; City; State; Zip Code 1515 Savannah Drive Richmond, TX 77406	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent for political apartment maintained in Austin
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/03/2025	Candidate/Officeholder name Humphries, Lynne	
Amount (\$) \$2,381.00	Payee address; City; State; Zip Code 1515 Savannah Drive Richmond, TX 77406	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent for political apartment maintained in Austin
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/03/2025	Candidate/Officeholder name Humphries, Lynne	
Amount (\$) \$2,381.00	Payee address; City; State; Zip Code 1515 Savannah Drive Richmond, TX 77406	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent for political apartment maintained in Austin
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: 11/23 Rpt: 27/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 02/04/2025	5 Payee name Innovation & Technology Caucus of the Texas House of Representatives	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 1100 Congress Avenue Austin, TX 78701	
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 Annual caucus membership dues
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/26/2025	Payee name Lake Whitney Chamber of Commerce	
Amount (\$) \$450.00	Payee address; City; State; Zip Code 102 W Railroad Avenue Whitney, TX 76692	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charitable contribution - table sponsor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/30/2025	Payee name Mammoth Marketing Group	
Amount (\$) \$1,446.22	Payee address; City; State; Zip Code 4500 Bissonnet Street Ste. 370 Bellaire, TX 77401	
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 Political Advertising - design, production and distribution of campaign text message
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: 12/23 Rpt: 28/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 06/06/2025	5 Payee name Mexia State Supported Living Center Volunteer Council	
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code PO Box 1132 Mexia, TX 76667	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charitable contribution - table sponsor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/14/2025	Payee name Norfleet Strategies	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 504 W 12th Street Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Political consulting - campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/23/2025	Payee name Norfleet Strategies	
Amount (\$) \$1,596.00	Payee address; City; State; Zip Code 504 W 12th Street Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Political consulting - campaign services
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: 13/23 Rpt: 29/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 02/11/2025	5 Payee name Norfleet Strategies	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 504 W 12th Street Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Political consulting - campaign services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/27/2025	Payee name Norfleet Strategies	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 504 W 12th Street Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Political consulting - campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/15/2025	Payee name Norfleet Strategies	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 504 W 12th Street Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Political consulting - campaign services
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: 14/23 Rpt: 30/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 05/09/2025	5 Payee name Norfleet Strategies	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 504 W 12th Street Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Political consulting - campaign services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2025	Payee name Norfleet Strategies	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 504 W 12th Street Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Political consulting - campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/24/2025	Payee name Opiela, Eric	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 9415 Old Lampasas Trail Austin, TX 78750	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/23 Rpt: 31/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 03/01/2025	5 Payee name Reagan, Jacob	
6 Amount (\$) \$98.21	7 Payee address; City; State; Zip Code 14920 Talus Road Manor, TX 78653	
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 Campaign contract labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/01/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$500.00	Payee name Reagan, Jacob Payee address; City; State; Zip Code 14920 Talus Road Manor, TX 78653	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/01/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$250.00	Payee name Reagan, Jacob Payee address; City; State; Zip Code 14920 Talus Road Manor, TX 78653	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign 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: 16/23 Rpt: 32/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 05/05/2025	5 Payee name Reagan, Jacob	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 14920 Talus Road Manor, TX 78653	
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 Campaign contract labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2025	Payee name Reagan, Jacob	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 14920 Talus Road Manor, TX 78653	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/27/2025	Payee name Reagan, Jacob	
Amount (\$) \$198.80	Payee address; City; State; Zip Code 14920 Talus Road Manor, TX 78653	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political mileage. Log maintained in the campaign office. (284m*0.70). Not reimbursed by the state.
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: 17/23 Rpt: 33/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 02/06/2025	5 Payee name Texas Conservative Coalition	
6 Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code PO Box 2659 Austin, TX 78768	
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 Annual membership dues
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/03/2025	Payee name Texas Department of Criminal Justice	
Amount (\$) \$441.66	Payee address; City; State; Zip Code PO Box 4013 Huntsville, TX 77342	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Items purchased to donate to local non-profits' fundraisers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2025	Payee name Texas House Republican Caucus	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 13305 Austin, TX 78711	
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 Annual caucus membership dues
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: 18/23 Rpt: 34/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 03/05/2025	5 Payee name Welch, Seth	
6 Amount (\$) \$982.14	7 Payee address; City; State; Zip Code 1727 Rosenborough Lane South Round Rock, TX 78665	
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 Campaign contract labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/20/2025	Payee name Welch, Seth	
Amount (\$) \$22.00	Payee address; City; State; Zip Code 1727 Rosenborough Lane South Round Rock, TX 78665	
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 Staff parking reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/20/2025	Payee name Welch, Seth	
Amount (\$) \$499.80	Payee address; City; State; Zip Code 1727 Rosenborough Lane South Round Rock, TX 78665	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political mileage. Log maintained in the campaign office (714m*0.70). Not reimbursed by the state.
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: 19/23 Rpt: 35/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 04/01/2025	5 Payee name Welch, Seth	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 1727 Rosenborough Lane South Round Rock, TX 78665	
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 Campaign contract labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/29/2025	Payee name Welch, Seth	
Amount (\$) \$351.40	Payee address; City; State; Zip Code 1727 Rosenborough Lane South Round Rock, TX 78665	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political mileage. Log maintained in campaign office (502m*0.70). Not reimbursed by the state.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/29/2025	Payee name Welch, Seth	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 1727 Rosenborough Lane South Round Rock, TX 78665	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign 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: 20/23 Rpt: 36/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 05/30/2025	5 Payee name Welch, Seth	
6 Amount (\$) \$45.00	7 Payee address; City; State; Zip Code 1727 Rosenborough Lane South Round Rock, TX 78665	
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 Software subscription reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2025	Payee name Welch, Seth	
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 1727 Rosenborough Lane South Round Rock, TX 78665	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/30/2025	Payee name Welch, Seth	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 1727 Rosenborough Lane South Round Rock, TX 78665	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign 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: 21/23 Rpt: 37/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 01/24/2025	5 Payee name Westgate Condominium Association	
6 Amount (\$) \$143.00	7 Payee address; City; State; Zip Code 1122 Colorado Street Austin, TX 78701	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities for political apartment maintained in Austin
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Westgate Condominium Association	
Amount (\$) \$151.00	Payee address; City; State; Zip Code 1122 Colorado Street Austin, TX 78701	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities for political apartment maintained in Austin
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	Payee name Westgate Condominium Association	
Amount (\$) \$153.00	Payee address; City; State; Zip Code 1122 Colorado Street Austin, TX 78701	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities for political apartment maintained n Austin
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: 22/23 Rpt: 38/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 04/22/2025	5 Payee name Westgate Condominium Association	
6 Amount (\$) \$247.00	7 Payee address; City; State; Zip Code 1122 Colorado Street Austin, TX 78701	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities for political apartment maintained in Austin
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/28/2025	Payee name Westgate Condominium Association	
Amount (\$) \$194.00	Payee address; City; State; Zip Code 1122 Colorado Street Austin, TX 78701	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities for political apartment maintained in Austin
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/26/2025	Payee name Westgate Condominium Association	
Amount (\$) \$201.00	Payee address; City; State; Zip Code 1122 Colorado Street Austin, TX 78701	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities for political apartment maintained in Austin
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: 23/23 Rpt: 39/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 05/30/2025	5 Payee name milk + honey	
6 Amount (\$) \$350.00	7 Payee address; City; State; Zip Code 100A Guadalupe Street Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Staff Gift
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: Sch: 1/1 Rpt: 40/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$
5 Date 06/30/2025	6 Payee name Orr, Angelia (Mrs.)	
7 Amount (\$) \$501.20	8 Payee address; City; State; Zip Code PO Box 113 Itasca, TX 76055	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political mileage. Log maintained in the campaign office. (716m*0.70). Not reimbursed by the state.
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2025	Payee name Welch, Seth	
Amount (\$) \$364.00	Payee address; City; State; Zip Code 1727 Rosenborough Lane South Round Rock, TX 78665	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political mileage. Log maintained in the campaign office. (520m*0.70). Not reimbursed by the state.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/41 Rpt: 41/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution American Express		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$2.38	(b) Date of Charge 01/11/2025	(c) Date(s) Credit Card Issuer Paid 02/23/2025	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing costs to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$2.38	(b) Date of Charge 01/11/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber Eats		(b) Payee address; City, State, Zip Code 17725 Foothill Boulevard Fontana, CA 92335	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description OH lunch meeting	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$4.92	(b) Date of Charge 01/12/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber Eats		(b) Payee address; City, State, Zip Code 17725 Foothill Boulevard Fontana, CA 92335	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description OH lunch meeting	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/41 Rpt: 42/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$507.84	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name The Otis		(b) Payee address; City, State, Zip Code 1901 San Antonio Street Austin, TX 78705
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description OH dinner meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$72.37	(b) Date of Charge 01/19/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Spectrum		(b) Payee address; City, State, Zip Code 1000 E 41st Street Ste. 920 Austin, TX 78751
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description WIFI and internet for political apartment maintained in Austin
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$75.39	(b) Date of Charge 02/19/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Spectrum		(b) Payee address; City, State, Zip Code 1000 E 41st Street Ste. 920 Austin, TX 78751
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description WIFI and internet for political apartment maintained in Austin
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 3/41 Rpt: 43/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$22.22	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$17.87	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$27.62	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 4/41 Rpt: 44/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$4.00	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$25.37	(b) Date of Charge 01/14/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$14.13	(b) Date of Charge 01/15/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 5/41 Rpt: 45/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$16.87	(b) Date of Charge 01/15/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$16.87	(b) Date of Charge 01/22/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$17.87	(b) Date of Charge 01/22/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 6/41 Rpt: 46/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$17.87	(b) Date of Charge 01/22/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$17.91	(b) Date of Charge 01/23/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$19.87	(b) Date of Charge 01/23/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 7/41 Rpt: 47/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$12.00	(b) Date of Charge 01/29/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$28.53	(b) Date of Charge 01/29/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$9.20	(b) Date of Charge 02/05/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 8/41 Rpt: 48/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$1.00	(b) Date of Charge 02/05/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$16.42	(b) Date of Charge 02/05/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$1.00	(b) Date of Charge 02/06/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 9/41 Rpt: 49/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$16.87	(b) Date of Charge 02/06/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$19.20	(b) Date of Charge 02/06/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$12.00	(b) Date of Charge 02/11/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 10/41 Rpt: 50/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$1.00	(b) Date of Charge 02/11/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$1.00	(b) Date of Charge 02/11/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$25.87	(b) Date of Charge 02/12/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 11/41 Rpt: 51/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$21.89	(b) Date of Charge 02/12/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$32.99	(b) Date of Charge 02/12/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$5.00	(b) Date of Charge 02/12/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 12/41 Rpt: 52/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$24.18	(b) Date of Charge 02/12/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$18.10	(b) Date of Charge 02/13/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$14.66	(b) Date of Charge 02/13/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 13/41 Rpt: 53/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$13.78	(b) Date of Charge 02/18/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$28.74	(b) Date of Charge 02/25/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$13.60	(b) Date of Charge 02/26/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 14/41 Rpt: 54/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$16.87	(b) Date of Charge 02/28/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$1.00	(b) Date of Charge 02/28/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$13.00	(b) Date of Charge 02/28/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 15/41 Rpt: 55/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$1.00	(b) Date of Charge 02/28/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$16.96	(b) Date of Charge 03/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$16.20	(b) Date of Charge 03/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 16/41 Rpt: 56/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$17.07	(b) Date of Charge 03/05/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$5.00	(b) Date of Charge 03/05/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$28.53	(b) Date of Charge 03/06/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 17/41 Rpt: 57/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$16.87	(b) Date of Charge 03/06/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$15.90	(b) Date of Charge 03/12/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$19.49	(b) Date of Charge 03/12/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 18/41 Rpt: 58/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$1.00	(b) Date of Charge 03/17/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$16.87	(b) Date of Charge 03/18/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$19.90	(b) Date of Charge 03/18/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 19/41 Rpt: 59/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$1.00	(b) Date of Charge 03/18/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$17.00	(b) Date of Charge 03/18/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$16.87	(b) Date of Charge 03/19/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 20/41 Rpt: 60/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$12.00	(b) Date of Charge 03/19/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$1.00	(b) Date of Charge 03/19/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$16.21	(b) Date of Charge 03/20/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 21/41 Rpt: 61/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$17.87	(b) Date of Charge 03/20/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$16.87	(b) Date of Charge 03/20/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$1.00	(b) Date of Charge 03/20/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 22/41 Rpt: 62/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$1.00	(b) Date of Charge 03/25/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$16.87	(b) Date of Charge 03/26/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$37.93	(b) Date of Charge 03/26/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 23/41 Rpt: 63/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$1.00	(b) Date of Charge 03/26/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$28.64	(b) Date of Charge 03/27/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$20.35	(b) Date of Charge 03/27/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 24/41 Rpt: 64/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$32.51	(b) Date of Charge 04/02/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$6.38	(b) Date of Charge 04/03/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$18.22	(b) Date of Charge 04/03/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 25/41 Rpt: 65/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$1.00	(b) Date of Charge 04/13/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$14.54	(b) Date of Charge 04/14/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$15.25	(b) Date of Charge 04/14/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 26/41 Rpt: 66/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$22.18	(b) Date of Charge 04/15/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$17.87	(b) Date of Charge 04/15/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$16.87	(b) Date of Charge 04/16/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 27/41 Rpt: 67/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$29.37	(b) Date of Charge 04/16/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$1.00	(b) Date of Charge 04/22/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$23.59	(b) Date of Charge 04/23/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 28/41 Rpt: 68/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$25.90	(b) Date of Charge 04/23/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$4.00	(b) Date of Charge 04/23/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$19.20	(b) Date of Charge 04/24/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 29/41 Rpt: 69/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$25.37	(b) Date of Charge 04/24/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$16.18	(b) Date of Charge 05/02/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$4.00	(b) Date of Charge 05/03/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 30/41 Rpt: 70/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$24.80	(b) Date of Charge 05/03/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$24.22	(b) Date of Charge 05/04/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$4.00	(b) Date of Charge 05/19/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 31/41 Rpt: 71/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$25.37	(b) Date of Charge 05/20/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$41.61	(b) Date of Charge 05/21/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$34.72	(b) Date of Charge 05/23/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 32/41 Rpt: 72/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$31.29	(b) Date of Charge 05/23/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$4.00	(b) Date of Charge 05/23/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$26.56	(b) Date of Charge 05/25/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 33/41 Rpt: 73/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$24.22	(b) Date of Charge 05/26/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$4.00	(b) Date of Charge 05/30/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$27.65	(b) Date of Charge 05/30/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 34/41 Rpt: 74/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$25.37	(b) Date of Charge 05/31/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$29.37	(b) Date of Charge 06/24/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$4.00	(b) Date of Charge 06/25/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 35/41 Rpt: 75/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$12.97	(b) Date of Charge 06/25/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$21.86	(b) Date of Charge 06/25/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$75.39	(b) Date of Charge 03/19/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Spectrum		(b) Payee address; City, State, Zip Code 1000 E 41st Street Ste. 920 Austin, TX 78751
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description WIFI and internet for political apartment maintained in Austin
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 36/41 Rpt: 76/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$75.39	(b) Date of Charge 04/19/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Spectrum		(b) Payee address; City, State, Zip Code 1000 E 41st Street Ste. 920 Austin, TX 78751	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description WIFI and internet for political apartment maintained in Austin	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$75.39	(b) Date of Charge 05/19/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Spectrum		(b) Payee address; City, State, Zip Code 1000 E 41st Street Ste. 920 Austin, TX 78751	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description WIFI and internet for political apartment maintained in Austin	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$90.46	(b) Date of Charge 06/19/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Spectrum		(b) Payee address; City, State, Zip Code 1000 E 41st Street Ste. 920 Austin, TX 78751	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description WIFI and internet for political apartment maintained in Austin	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 37/41 Rpt: 77/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$58.46	(b) Date of Charge 05/24/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Phoebe's Diner		(b) Payee address; City, State, Zip Code 408 West 11th Street Austin, TX 78701
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description OH lunch meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$55.46	(b) Date of Charge 06/04/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Jorge's Mexican Restaurant		(b) Payee address; City, State, Zip Code 4225 Franklin Avenue Waco, TX 76710
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description OH lunch meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$73.60	(b) Date of Charge 06/12/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber Eats		(b) Payee address; City, State, Zip Code 17725 Foothill Boulevard Fontana, CA 92335
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description OH lunch meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 38/41 Rpt: 78/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$11.87	(b) Date of Charge 06/27/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 6031 Carol Stream, IL 60197
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Interest expense
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$50.40	(b) Date of Charge 03/06/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name The Grove		(b) Payee address; City, State, Zip Code 800 W 6th Street #100 Austin, TX 78701
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description OH dinner meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$9.19	(b) Date of Charge 03/22/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Dairy Queen		(b) Payee address; City, State, Zip Code 311 N Avenue G Clifton, TX 76634
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description OH lunch meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 39/41 Rpt: 79/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$325.00	(b) Date of Charge 04/28/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 6031 Carol Stream, IL 60197
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Annual membership fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$176.43	(b) Date of Charge 05/22/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Total Wine		(b) Payee address; City, State, Zip Code 1201 Barbara Jordan Boulevard Ste. 900 Austin, TX 78723
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Gift for committee chairman
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$10.49	(b) Date of Charge 06/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber Eats		(b) Payee address; City, State, Zip Code 17725 Foothill Boulevard Fontana, CA 92335
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description OH lunch meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 40/41 Rpt: 80/85	2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$26.92	(b) Date of Charge 06/01/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Uber Eats		(b) Payee address; City, State, Zip Code 17725 Foothill Boulevard Fontana, CA 92335
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description OH office meal
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$57.43	(b) Date of Charge 06/25/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Uber Eats		(b) Payee address; City, State, Zip Code 17725 Foothill Boulevard Fontana, CA 92335
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description OH lunch meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$29.00	(b) Date of Charge 06/23/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 6031 Carol Stream, IL 60197
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Credit card fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 41/41 Rpt: 81/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$1.00	(b) Date of Charge 03/07/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$140.56	(b) Date of Charge 05/14/2025	(c) Date(s) Credit Card Issuer Paid 06/30/2025	
PAYEE		(a) Payee name Yeti		(b) Payee address; City, State, Zip Code 7601 Southwest Parkway Austin, TX 78735	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Committee chairman gift	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$17.87	(b) Date of Charge 01/12/2025	(c) Date(s) Credit Card Issuer Paid 02/23/2025	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market Street Ste. 400 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ride-sharing cost to attend OH meetings	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/3 Rpt: 82/85		2 FILER NAME Orr, Angelia Duke (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085955	
4 Date 01/23/2025		5 Payee name American Express			
6 Amount (\$) \$662.44 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code PO Box 6031 Carol Stream, IL 60197			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Credit Card Payment		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for items properly reported on Sched F4 of prior report	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/23/2025		Payee name American Express			
Amount (\$) \$864.38 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO Box 6031 Carol Stream, IL 60197			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Credit Card Payment		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for items properly reported on Sched F4 of this report	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/23/2025		Payee name American Express			
Amount (\$) \$351.89 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO Box 6031 Carol Stream, IL 60197			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Credit Card Payment		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for items properly reported on Sched F4 of this report	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/3 Rpt: 83/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 04/23/2025	5 Payee name American Express	
6 Amount (\$) \$547.25 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 6031 Carol Stream, IL 60197	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for items properly reported on Sched F4 of this report
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/23/2025	Payee name American Express	
Amount (\$) \$673.64 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 6031 Carol Stream, IL 60197	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for items properly reported on Sched F4 of this report
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2025	Payee name American Express	
Amount (\$) \$571.25 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 6031 Carol Stream, IL 60197	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for items properly reported on Sched F4 of this report
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 3/3 Rpt: 84/85	2 FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4 Date 06/30/2025	5 Payee name American Express	
6 Amount (\$) \$140.56 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 6031 Carol Stream, IL 60197	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for items properly reported on Sched F4 of this report
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 85/85

2 FILER NAME

Orr, Angelia Duke (The Honorable)

3 Filer ID (Ethics Commission Filers)
00085955

4 Date

04/07/2025

5 Name of person from whom amount is received

Venmo

8 Amount (\$)

\$441.66

6 Address of person from whom amount is received; City; State; Zip Code

New York, NY 10014

7 Purpose for which amount is received

Committee chairman gift reimbursement from other Members

☐ Check if political contribution returned to filer